

## 1 / 173

FF1AN060.PDF

**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS****2 / 173**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

**Chris Dodd For President Inc**

Report Covering the Period

From: 01/01/2008

To: 01/31/2008

<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	58435.97	9840079.47
(b) Political Party Committees	.....	0.00	100.00
(c) Other Political Committees	.....	2750.00	635398.00
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		61185.97	10475577.47
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	4739005.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Loans	.....	0.00	1302811.25
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	1302811.25
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	0.00	35032.33
(b) Fundraising	.....	0.00	240.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		0.00	35272.33
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	0.00	55535.35
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	61185.97	16608201.40
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES	.....	486292.45	14527348.54
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Repayments	.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	10900.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	0.00	10900.00
29. OTHER DISBURSEMENTS	.....	0.00	6000.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	486292.45	14544248.54
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE** 3 / 173  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

Chris Dodd For President Inc

ADDRESS (number and street)

PO Box 270701

CITY, STATE, and ZIP CODE

West Hartford

CT

06127

2. IDENTIFICATION NUMBER

C00431379

## ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	1581.00	31412.23
Arizona	0.00	0.00	New Hampshire	15831.55	699133.57
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	41.21	41.21	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	533.78
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	84416.58	2573972.08	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	68.00	68.00	Washington	0.00	0.00
Massachussetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>101938.34</b>	<b>3305160.87</b>

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Jeffrey Behnke

Mailing Address

92 Salem Heights Estates

City

Lake Ariel

State

PA

Zip Code

18436

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired-Boeing

Occupation

Aerospace Engineer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: ADCD85D3783A342ADA97

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert Berchem

Mailing Address

75 Broad Street

City

Milford

State

CT

Zip Code

06460

FEC ID number of contributing  
federal political committee.

Name of Employer  
Berchem, Moses & Devlin  
PC

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A141FC9444FE64D8ABEA

**C.**

Full Name (Last, First, Middle Initial)

Sharon Bethea

Mailing Address

2402 S. Turnberry Ave

City

Zachary

State

LA

Zip Code

70791

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation

N/a

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AD29C083CE19A429E9B0

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Kathy A Blackwelder

Mailing Address

315 NW 3rd

City

Grants Pass

State

OR

Zip Code

97526-1957

FEC ID number of contributing  
federal political committee.

Name of Employer  
self

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A37A8D9DA920B435BB7E

**B.**

Full Name (Last, First, Middle Initial)

Mr. Allan Bonadio

Mailing Address

150 Acalanes Drive

#230

City

Sunnyvale

State

CA

Zip Code

94086-4503

FEC ID number of contributing  
federal political committee.

Name of Employer  
Tactile Interactive

Occupation

Programmer

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A4424D40261514C85BE8

**C.**

Full Name (Last, First, Middle Initial)

Jeffrey N Bortniker

Mailing Address

4 Cob Dr

City

Westport

State

CT

Zip Code

06880-2109

FEC ID number of contributing  
federal political committee.

Name of Employer  
Chatham Environmental Gro-  
up

Occupation

CEO

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A18C53A5BC52A42A68BA

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 173

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael V Brown

Mailing Address

67 Point Beach Drive

City

Milford

State

CT

Zip Code

06460-7647

FEC ID number of contributing  
federal political committee.

Name of Employer  
New Standard Institute

Occupation

Managemenet Consultant

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A5D5FD12E40BB46318DB

**B.**

Full Name (Last, First, Middle Initial)

Ms. Shirley Browner

Mailing Address

5961 Palisade Avenue

City

Bronx

State

NY

Zip Code

10471-1253

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A58CF816D55354F6D83B

**C.**

Full Name (Last, First, Middle Initial)

Ms. Julia T Buonanno

Mailing Address

2946 Glenwood Drive

City

Boulder

State

CO

Zip Code

80301

FEC ID number of contributing  
federal political committee.

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

2300.00

Transaction ID: A07552935A66443EFA10

**SUBTOTAL** of Receipts This Page (optional) .....

2600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Sean Burke

Mailing Address

616 S. 16th St.

City

Philadelphia

State

PA

Zip Code

19146-1551

FEC ID number of contributing  
federal political committee.

Name of Employer  
University of Pennsylvania

Occupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

296.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: AAD5B2C5DBF9A44F281C

**B.**

Full Name (Last, First, Middle Initial)

Donald Campbell

Mailing Address

11 County Rd 30

City

Mt. Hope

State

AL

Zip Code

35651

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation  
Data Analyst

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: AA001F703C9C843068D4

**C.**

Full Name (Last, First, Middle Initial)

Rita Capello

Mailing Address

811 Grand Manor Dr

City

Wrightsville

State

PA

Zip Code

17368

FEC ID number of contributing  
federal political committee.

Name of Employer  
None

Occupation  
None

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A16C8B4449AC440219CE

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Michael Caplin

Mailing Address

8477 Portland Place

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

Name of Employer  
Time & Place

Occupation

Executive

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A4903D50A563B464A865

**B.**

Full Name (Last, First, Middle Initial)

Nancy Cashman

Mailing Address

25 Kingston Ave

City

Yonkers

State

NY

Zip Code

10701-5102

FEC ID number of contributing  
federal political committee.

Name of Employer  
Cravath, Swaine & Moore  
LLP

Occupation

Word Processor

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 0 8

Amount of Each Receipt this Period

200.00

Transaction ID: A990AF05FDA3D4D7EA45

**C.**

Full Name (Last, First, Middle Initial)

Lewis Cole

Mailing Address

340 West 55th St apt 7d

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing  
federal political committee.

Name of Employer  
Playbill Inc.

Occupation

Accountant

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AD4AB58C42B0E4746930

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. Lance Cote

Mailing Address

201 N. Mill Street

City

Aspen

State

CO

Zip Code

81611-1557

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self Employed

Occupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A4A3A4D4C95D548FEBBC

**B.**

Full Name (Last, First, Middle Initial)

Ms. Amy Cousins

Mailing Address

220 Central Park South

7B

City

New York

State

NY

Zip Code

10019-1417

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self-Employed

Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A27BAFA1E2ABD4ED5BB8

**C.**

Full Name (Last, First, Middle Initial)

Christine Davis

Mailing Address

1004 E. Constitution Dr

City

Gilbert

State

AZ

Zip Code

85296

FEC ID number of contributing  
federal political committee.

Name of Employer  
self

Occupation  
Consultant

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A538C68318FD94FD88AD

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. Paul Day-Lucore

Mailing Address

170 S. Oneida Street

City

Denver

State

CO

Zip Code

80230-6949

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.04

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: AD0ADAF03AC8548E0A9E

**B.**

Full Name (Last, First, Middle Initial)

Steven Devries

Mailing Address

512 N. McClurg Ct #2105

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

Name of Employer  
Oklahoma State University

Occupation

Professor emeritus

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A1FE868F083D0472287A

**C.**

Full Name (Last, First, Middle Initial)

William Dolan

Mailing Address

8010 Towers Crescent Drive, Suite

City

Vienna

State

VA

Zip Code

22182

FEC ID number of contributing  
federal political committee.

Name of Employer  
Venable LLP

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A27B17CD1FD614FA3B5A

**SUBTOTAL** of Receipts This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 173

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Regina Driscoll

Mailing Address

1492 Albert Street N

City

Saint Paul

State

MN

Zip Code

55108-2302

FEC ID number of contributing  
federal political committee.

Name of Employer  
Children's Hospitals and  
Clinics of M

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: AA0ECD9B2DBC5474692D

**B.**

Full Name (Last, First, Middle Initial)

Mr. David Drumm

Mailing Address

5701 Scout Bluff Lane

City

Austin

State

TX

Zip Code

78731

FEC ID number of contributing  
federal political committee.

Name of Employer  
Alereon, Inc.

Occupation

Engineer

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

1000.00

Transaction ID: AB7A444B1DE344049A10

**C.**

Full Name (Last, First, Middle Initial)

Ms. Fran Egbers

Mailing Address

555 Canal Street #1205

City

Manchester

State

NH

Zip Code

03101-1521

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AD1249379911F4CEFAC4

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Michael Elias

Mailing Address

2706 Midvale Ave

City

Los Angeles

State

CA

Zip Code

90064

FEC ID number of contributing  
federal political committee.

Name of Employer  
Neversink Productions

Occupation  
Screenwriter

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

327.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A4AEA9B0403A74BB59FB

**B.**

Full Name (Last, First, Middle Initial)

Curtis Engelhard

Mailing Address

180 Pecora Way

City

Portola Valley

State

CA

Zip Code

94028

FEC ID number of contributing  
federal political committee.

Name of Employer  
Intel

Occupation  
Statistician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

200.00

Transaction ID: A24DF328AA9A94932BDA

**C.**

Full Name (Last, First, Middle Initial)

Robert Gabel

Mailing Address

27 Pinckney Rd

City

Red Bank

State

NJ

Zip Code

07701

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self, MD

Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A8CF0FEFA13444899B10

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 173

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sarah Gandt</p> <p>Mailing Address 320 Villa Terrace Apt 1</p> <p>City State Zip Code San Mateo CA 94401</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer salesforce.com</p> <p>Occupation Marketing Manager</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 275.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 0 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 50.00</p> <p>Transaction ID: A040692BB3E034BCBADA</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jared Gardner</p> <p>Mailing Address 8329 Brentmoor</p> <p>City State Zip Code Wichita KS 67206</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 2 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Transaction ID: AD14E6D2553434F9D862</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ms. Barbara Giaimo-Koones</p> <p>Mailing Address 9924 Bencross Drive</p> <p>City State Zip Code Potomac MD 20854</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer N/A</p> <p>Occupation Homemaker</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 2000.00</p> <p>Transaction ID: A932D0BFDD1EE4F5EBCF</p>

**SUBTOTAL** of Receipts This Page (optional) .....

2550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Melvin Goldstein

Mailing Address

87 Sanford Ln

City

Stamford

State

CT

Zip Code

06905-2819

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

200.00

Transaction ID: A05C164757D9E437CAD6

**B.**

Full Name (Last, First, Middle Initial)

Charles Greene

Mailing Address

93 Woodside Ln

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A2D67DB1BAAC14DF7B43

**C.**

Full Name (Last, First, Middle Initial)

Constance Greenfield

Mailing Address

279 Sturges Hwy

City

Westport

State

CT

Zip Code

06880

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation  
Homemaker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: A03D5134A43954655B39

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Julie Gurung

Mailing Address

5 Cherry Circle

City

Pomona

State

NY

Zip Code

10970

FEC ID number of contributing  
federal political committee.

Name of Employer  
HiFi Trader, Ltd.

Occupation

Entrepreneur

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: ACCF6C6A506A64AA0B78

**B.**

Full Name (Last, First, Middle Initial)

Julie Gurung

Mailing Address

5 Cherry Circle

City

Pomona

State

NY

Zip Code

10970

FEC ID number of contributing  
federal political committee.

Name of Employer  
HiFi Trader, Ltd.

Occupation

Entrepreneur

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: AAC6BC17780E64B98B53

**C.**

Full Name (Last, First, Middle Initial)

Stephen Hanson

Mailing Address

594 Broadway, Suite 803

City

New York

State

NY

Zip Code

10012

FEC ID number of contributing  
federal political committee.

Name of Employer  
B.R. Guest

Occupation

President

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

2300.00

Transaction ID: A2F76F719B2B94E25B05

**SUBTOTAL** of Receipts This Page (optional) .....

2400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. Joseph M Hemingway

Mailing Address

10 Overlook Knoll

City

Sandy Hook

State

CT

Zip Code

06482-1032

FEC ID number of contributing  
federal political committee.

Name of Employer  
The Fusco Corporation

Occupation

Project Manager

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A38BA91FFBF2A417D8C2

**B.**

Full Name (Last, First, Middle Initial)

Virginia A. Hendry

Mailing Address

111 E. Chestnut St #11j

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

Name of Employer  
Infor

Occupation

Programmer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A5EA1FE8024DA445AAB1

**C.**

Full Name (Last, First, Middle Initial)

Ms. Theresa Henkelmann

Mailing Address

5 Georgetown North

City

Greenwich

State

CT

Zip Code

06831-5233

FEC ID number of contributing  
federal political committee.

Name of Employer  
Thomas Henkelmann-Homeste-  
ad Inn

Occupation

Restaurateur

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A9AAC594B0268437DA92

**SUBTOTAL** of Receipts This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Lyle W. Horn

Mailing Address

1485 Vincent Ave

City

Watsontown

State

PA

Zip Code

17777

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A341E3E0027CD45BA802

**B.**

Full Name (Last, First, Middle Initial)

Mr. Lewis A Hurwitz

Mailing Address

682 North Street

City

Milford

State

CT

Zip Code

06461

FEC ID number of contributing  
federal political committee.

Name of Employer  
Harris, Beach & Wilcox

Occupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: ADFC05C6652F14E1789D

**C.**

Full Name (Last, First, Middle Initial)

Alice M Hutchinson

Mailing Address

153 Rockwell Rd

City

Bethel

State

CT

Zip Code

06801-3005

FEC ID number of contributing  
federal political committee.

Name of Employer  
Canterbury School

Occupation  
Development Director

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A28C7461032124417A4E

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Noreen Hynes

Mailing Address

519 North Thomas St

City

Arlington

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

Name of Employer  
Pro bono work only at this  
time at Job

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
Physician

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: ACA23BA17B61C42F0BAF

**B.**

Full Name (Last, First, Middle Initial)

Clay Jackson

Mailing Address

PO Box 6383

City

Brentwood

State

TN

Zip Code

37024

FEC ID number of contributing  
federal political committee.

Name of Employer  
BB&T, Cooper, Love, Jack-  
son, Thornton

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
Senior VP

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: A88D688E4C98148BABBD

**C.**

Full Name (Last, First, Middle Initial)

Kay Jackson

Mailing Address

144 -guildford SE

City

Cedar Rapids

State

IA

Zip Code

52403

FEC ID number of contributing  
federal political committee.

Name of Employer  
Mercy Medical Center & se-  
lf

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
Nurse--Attorney

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: A7788C97368A14D3B8FA

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Carolyn Jordan

Mailing Address

204 Highland Avenue

City

Arlington

State

MA

Zip Code

02476-7851

FEC ID number of contributing  
federal political committee.

Name of Employer  
University of New Hampshi-  
re

Occupation  
Scientist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A2E666B195F524752AD8

**B.**

Full Name (Last, First, Middle Initial)

Ms. Arlene Joyce

Mailing Address

752 Norvell Street

City

El Cerrito

State

CA

Zip Code

94530-3246

FEC ID number of contributing  
federal political committee.

Name of Employer  
Cal. Dept. of Insurance

Occupation  
Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: AC62FA0EA0D834385915

**C.**

Full Name (Last, First, Middle Initial)

Steven Judd

Mailing Address

83 -989 Kaohia Place

City

Captain Cook

State

HI

Zip Code

96704

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A249CAF760F2640178BD

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Eric Klusman

Mailing Address

16124 Gilmore St

City

Van Nuys

State

CA

Zip Code

91406

FEC ID number of contributing  
federal political committee.

Name of Employer  
United Online

Occupation

Data Analyst

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A5C6A8B4D76B74DD2805

**B.**

Full Name (Last, First, Middle Initial)

Russell Lane

Mailing Address

15 Canterbury Rd

City

Marblehead

State

MA

Zip Code

01945

FEC ID number of contributing  
federal political committee.

Name of Employer  
Ipswitch Corp

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A3CE3FF180D2D44E4936

**C.**

Full Name (Last, First, Middle Initial)

Richard Larson

Mailing Address

141 S. Scoville Ave

City

Oak Park

State

IL

Zip Code

60302

FEC ID number of contributing  
federal political committee.

Name of Employer  
Univ. of Illinois at Chic-  
ago

Occupation

Retired Professor

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AB5091AEE391B44BAAC2

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Unice B. Lieberman

Mailing Address

3937 Garrison St. NW

City

Washington

State

DC

Zip Code

20016-4219

FEC ID number of contributing  
federal political committee.

Name of Employer  
American Cancer Society

Occupation

Senior Information Specialist

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

1000.00

Transaction ID: A35CFC255A74946E9A1F

**B.**

Full Name (Last, First, Middle Initial)

Justin Ludwig

Mailing Address

425 Bellevue Way Se, Apt 65

City

Bellevue

State

WA

Zip Code

98004

FEC ID number of contributing  
federal political committee.

Name of Employer  
Software AG

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A978602F9887545EBAD6

**C.**

Full Name (Last, First, Middle Initial)

James Margaris

Mailing Address

26 Ivaloo St #1

City

Somerville

State

MA

Zip Code

02143

FEC ID number of contributing  
federal political committee.

Name of Employer  
Nexaweb Technologies Inc

Occupation

Engineer

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A05D0417F838142E3A4F

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Tessa Marquis

Mailing Address

67 Point Beach Drive

City

Milford

State

CT

Zip Code

06460

FEC ID number of contributing  
federal political committee.

Name of Employer  
New Standard Institute

Occupation

Project Coordinator

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AE21D730CF1BB4851ACC

**B.**

Full Name (Last, First, Middle Initial)

Joseph F. McGinn

Mailing Address

1609 Madison Ave

City

Council Bluffs

State

IA

Zip Code

51503

FEC ID number of contributing  
federal political committee.

Name of Employer  
McGinn Law Firm

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: AB290FFA091C64BDC8D5

**C.**

Full Name (Last, First, Middle Initial)

Barbara McHugh

Mailing Address

1122 West Ave

City

Richmond

State

VA

Zip Code

23220

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation

N/a

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A18D10B233DDD4540B9D

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Clara McIver

Mailing Address

15 Lillian Street

City

Tabernacle

State

NJ

Zip Code

08088-9351

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

35.00

Transaction ID: AF15E1DF522854E32B7C

**B.**

Full Name (Last, First, Middle Initial)

Jeff Mermin

Mailing Address

2300 Wakarusa Dr

P-7

City

Lawrence

State

KS

Zip Code

66047

FEC ID number of contributing  
federal political committee.

Name of Employer  
University of Kansas

Occupation

Professor

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: AD7E7AAA3D8C84AAFBFC

**C.**

Full Name (Last, First, Middle Initial)

Catherine Morris

Mailing Address

4330 Harwood Dr

City

Des Moines

State

IA

Zip Code

50312

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A652D8551758E486285F

**SUBTOTAL** of Receipts This Page (optional) .....

160.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Judy Moursund

Mailing Address

132 N. El Camino Real #333

City

Encinitas

State

CA

Zip Code

92024-2801

FEC ID number of contributing  
federal political committee.

Name of Employer  
Carlitas Co.

Occupation  
Accountant

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AA005A650FC244BE58CE

**B.**

Full Name (Last, First, Middle Initial)

Terry Muilenburg

Mailing Address

3625 N. Upland St

City

Arlington

State

VA

Zip Code

22207-4532

FEC ID number of contributing  
federal political committee.

Name of Employer  
USA Funds

Occupation  
Gov Affairs

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A2DC9A38618D749CDAAB

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Christine Naylor

Mailing Address

6369 31st Place NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing  
federal political committee.

Name of Employer  
Results/REF

Occupation  
Executive Director

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AD01E050573C04330B3E

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 173

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. Norman Needleman

Mailing Address

P.O. Box 354

City

Centerbrook

State

CT

Zip Code

06409-0354

FEC ID number of contributing  
federal political committee.

Name of Employer  
Tower Labs, LTD.

Occupation

Executive

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 2 8 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AA38C318A8ABA4F36A2F

**B.**

Full Name (Last, First, Middle Initial)

Barbara Ostrowsky

Mailing Address

291 Salisbury Ave

City

Goleta

State

CA

Zip Code

93117

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

633.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A8783293651B54889AAB

**C.**

Full Name (Last, First, Middle Initial)

Nieba C. Paige

Mailing Address

1322 SE 60th Ave

City

Portland

State

OR

Zip Code

97215

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A1CCA4C7098E74E0F930

**SUBTOTAL** of Receipts This Page (optional) .....

175.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Elizabeth Paterson

Mailing Address

79 Independence Drive

City

Mansfield Center

State

CT

Zip Code

06250-1541

FEC ID number of contributing  
federal political committee.

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A15D47627BE2A4364A72

**B.**

Full Name (Last, First, Middle Initial)

Mr. Walter Pearce

Mailing Address

9310 Allwood Court

City

Alexandria

State

VA

Zip Code

22309-3209

FEC ID number of contributing  
federal political committee.

Name of Employer  
KCI Communications

Occupation

Publisher

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A97C906F26C574F31BF0

**C.**

Full Name (Last, First, Middle Initial)

Ted Peck

Mailing Address

3 Traymore St

City

Cambridge

State

MA

Zip Code

02140

FEC ID number of contributing  
federal political committee.

Name of Employer  
InterSystems Corp.

Occupation

Software Designer

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

75.00

Transaction ID: AE640D22487EA4193AC2

**SUBTOTAL** of Receipts This Page (optional) .....

425.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Carolyn Pirillo

Mailing Address

7208 Rio Tamega Dr

City

Elk Grove

State

CA

Zip Code

95757

FEC ID number of contributing  
federal political committee.

Name of Employer  
State of California

Occupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A2F02483C40BD422F9E0

**B.**

Full Name (Last, First, Middle Initial)

Mr. Paul S Pizzo

Mailing Address

75 Long Hill Road

City

Middlefield

State

CT

Zip Code

06455-1140

FEC ID number of contributing  
federal political committee.

Name of Employer  
Paul Pizzo Architects

Occupation  
Architecture

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AB565D44AFC0143BAB71

**C.**

Full Name (Last, First, Middle Initial)

Walter Plourde

Mailing Address

4 Randall Ct , #2

City

Annapolis

State

MD

Zip Code

21401

FEC ID number of contributing  
federal political committee.

Name of Employer  
Jenzabar, Inc.

Occupation  
Software Engineer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AA377EADB288A40ECA3E

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. Joe A Pope

Mailing Address

17 E. Kelley Road

City

Newbury Park

State

CA

Zip Code

91320-4518

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: A041138E0BA644B6D84A

**B.**

Full Name (Last, First, Middle Initial)

Ms. Tracy Pridgen

Mailing Address

306 2nd Street

City

Brooklyn

State

NY

Zip Code

11215-2484

FEC ID number of contributing  
federal political committee.

Name of Employer  
Rabobank International

Occupation

Financial Analyst

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: AE51F99FDF4194A4E80F

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Kathryn L Robinson

Mailing Address

87 Transit Street

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 3 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: A6EC6E96BF0334169BC6

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Saul Rosen

Mailing Address

C/O Salomon Smith Barney

399 Park Avenue

City

State

Zip Code

New York

NY

10043-0001

FEC ID number of contributing  
federal political committee.

Name of Employer  
Citigroup Corp

Occupation

Chief Tax Officer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 3 / 2 0 0 8

Amount of Each Receipt this Period

1000.00

Transaction ID: AAA25374D17BD4FC0AD7

**B.**

Full Name (Last, First, Middle Initial)

Ms. Judy Ruebush

Mailing Address

8 Crestway

P.O. Box 2989

City

State

Zip Code

Silver City

NM

88061-5641

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self-Employed

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: ABCB42D7728F7422EA7D

**C.**

Full Name (Last, First, Middle Initial)

Joseph Scaro

Mailing Address

852 Quail John Rd

City

State

Zip Code

East Thetford

VT

05043

FEC ID number of contributing  
federal political committee.

Name of Employer  
BroadVision, Inc.

Occupation

Software Engineer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A9D4E92506A2642EC934

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert Schacht

Mailing Address

1617 S. Beretania Street #205

City

Honolulu

State

HI

Zip Code

96826-1107

FEC ID number of contributing  
federal political committee.

Name of Employer  
University of Hawaii

Occupation

Research Associate

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A732D0A246087438CA14

**B.**

Full Name (Last, First, Middle Initial)

Stacy Shelton

Mailing Address

15052 Gypsy Hill Rd

City

Saratoga

State

CA

Zip Code

95070

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation

retired attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.53

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 3 1 / 2 0 0 8

Amount of Each Receipt this Period

250.53

Transaction ID: A011E5951A65643708B2

**C.**

Full Name (Last, First, Middle Initial)

Mr. David A Slossberg

Mailing Address

14 Honeysuckle Lane

City

Milford

State

CT

Zip Code

06460

FEC ID number of contributing  
federal political committee.

Name of Employer  
Hurwitz, Sagarin, Slossberg & Knuff LL

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: A3EF1DAA6CB9842BA851

**SUBTOTAL** of Receipts This Page (optional) .....

800.53

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Monica Smith

Mailing Address

246 Packers Falls Road

City

Durham

State

NH

Zip Code

03824-4401

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

472.04

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AF4D14BD44899469F84D

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Greta Stanford

Mailing Address

32 Spicebush Lane

City

Milford

State

CT

Zip Code

06461-1793

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A684042FD96AE47D58D9

**C.**

Full Name (Last, First, Middle Initial)

Shirley Steinmetz

Mailing Address

375 Brimfield Road

City

Wethersfield

State

CT

Zip Code

06109-3203

FEC ID number of contributing  
federal political committee.

Name of Employer  
Wethersfield Board of Edu-  
cation

Occupation

Program Leader

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: AE6E9BFB490234559981

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Karolina Sussland

Mailing Address

920 East McKinley Street

City

Phoenix

State

AZ

Zip Code

85006-3242

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self Employed

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: A4A6FF11A2FDF44039F8

**B.**

Full Name (Last, First, Middle Initial)

Dan Tappan

Mailing Address

867 Liberty Sq Rd

City

Boxborough

State

MA

Zip Code

01719

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self Employed

Occupation

Consultant

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AF9A91D6FF2F247BEAEE

**C.**

Full Name (Last, First, Middle Initial)

Mr. William Thomas

Mailing Address

1391 Bridle Way

City

Minden

State

NV

Zip Code

89423-8842

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self Employed

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: A99673B2631D54602BF3

**SUBTOTAL** of Receipts This Page (optional) .....

325.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 173

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. George Warburg

Mailing Address

820 Hartford Turnpike

City

Hamden

State

CT

Zip Code

06517-1600

FEC ID number of contributing  
federal political committee.

Name of Employer  
N/A

Occupation

Information Requested

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: A14B4B0579A2E45CD93F

**B.**

Full Name (Last, First, Middle Initial)

Mr. George White

Mailing Address

30 Sutton Place

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

2300.00

Transaction ID: A4326235375B5419D830

**C.**

Full Name (Last, First, Middle Initial)

n/a Unitemized Donors

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

33250.44

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

33250.44

Unitemized Donors

Transaction ID: U4E41F5A5EA1D4F78A9E

**SUBTOTAL** of Receipts This Page (optional) .....

35650.44

**TOTAL** This Period (last page this line number only) .....

58435.97

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 173

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input checked="" type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Cromwell Democratic Town Committee PAC

Mailing Address

5 Forest Road

City

Cromwell

State

CT

Zip Code

06416

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: AFF6DCBEAE2694139B20

**B.**

Full Name (Last, First, Middle Initial)

Radian Group Inc. PAC

Mailing Address

1601 Market Street

City

Philadelphia

State

PA

Zip Code

19103-2301

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 0 8

Amount of Each Receipt this Period

2500.00

Transaction ID: A84DB362AA2464571BA2

**SUBTOTAL** of Receipts This Page (optional) .....

2750.00

**TOTAL** This Period (last page this line number only) .....

2750.00

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll Services</p> <p>Mailing Address 126 Marrow Road</p> <p>City Auburn State ME Zip Code 04210</p> <p>Purpose of Disbursement Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B71618CA6DAFE4479B4F</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="264.63"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Advantage Payroll Services</p> <p>Mailing Address 126 Marrow Road</p> <p>City Auburn State ME Zip Code 04210</p> <p>Purpose of Disbursement Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B61A98E68D4F6468BB63</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="252.59"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Ambrose Properties, LC</p> <p>Mailing Address 250 12th Avenue, Suite 150</p> <p>City Coralville State IA Zip Code 52241</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B0434E597A4D84D7EA3D</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="900.00"/></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <input type="text" value="1417.22"/></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ► <input type="text"/></p>	

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) American Express	<b>Transaction ID:</b> BFFA2FF3364FD4E32A7F <b>Date of Disbursement</b>																				
Mailing Address PO Box 981535	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	8		2	0	0	8												
City El Paso State TX Zip Code 79998-1535	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement See Below	<table border="1"> <tr> <td>28.03</td> </tr> </table>	28.03																			
28.03																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Anthem Blue Cross Blue Shield	<b>Transaction ID:</b> B89691ABADC464DB28D0 <b>Date of Disbursement</b>																				
Mailing Address 370 Bassett Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												
City North Haven State CT Zip Code 06473-4201	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Health Insurance	<table border="1"> <tr> <td>23127.66</td> </tr> </table>	23127.66																			
23127.66																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Bankers Block Company	<b>Transaction ID:</b> B59A8DFC521424F2BADB <b>Date of Disbursement</b>																				
Mailing Address 221 Jefferson Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Burlington State IA Zip Code 52601	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Rent	<table border="1"> <tr> <td>575.00</td> </tr> </table>	575.00																			
575.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**23730.69**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Blue Apple Corp

Mailing Address 2139 N Scott Street

City  
Arlington

State  
VA

Zip Code  
22209

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B37EB72BB91054F81B8B

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10000.00

**B.**

Full Name (Last, First, Middle Initial)

Blue Apple Corp

Mailing Address 2139 N Scott Street

City  
Arlington

State  
VA

Zip Code  
22209

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BF9D67DDDBF0A4FB6ABD

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

C & G, LC

Mailing Address c/o Taragon COMmercial Interiors  
210 Emerson Place

City  
Davenport

State  
IA

Zip Code  
52801

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B2A3416A6C696446CBCA

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

13250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) CT Dept Taxation</p> <p>Mailing Address 25 Sigourney St.</p> <p>City Hartford State CT Zip Code 06106</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B167E707381FA4C03B81</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1308.70</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CT Dept Taxation</p> <p>Mailing Address 25 Sigourney St.</p> <p>City Hartford State CT Zip Code 06106</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B361A2F33BE6D4D8FA92</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 792.24</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) DC Dept Taxation</p> <p>Mailing Address P.O. Box 470</p> <p>City Washington State DC Zip Code 20044</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B388485EF7B854E25BA7</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 5402.73</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► 7503.67</p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>	

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) DC Dept Taxation Mailing Address P.O. Box 470	<b>Transaction ID:</b> BD412066890DF4A40A6A <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20044 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>2653.44</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Direct TV Mailing Address PO Box 60036 City Los Angeles State CA Zip Code 90060 Purpose of Disbursement Cable Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B5F3AF59314F5476799C <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>88.07</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Groundswell Communication Mailing Address 101 North Union Street, Suite 305 City Alexandria State VA Zip Code 22314 Purpose of Disbursement Calls Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> BC279B0D94BAD4CC385D <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>10571.48</div>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>13312.99</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Happy's Place

Mailing Address 2323 Rockdale Road

City State Zip Code  
Dubuque IA 52003-8062

Purpose of Disbursement

Food & Beverage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BA2C36FAC4578460D842

Date of Disbursement

/   /

Amount of Each Disbursement this Period

660.00

**B.**

Full Name (Last, First, Middle Initial)

IA Dept Taxation

Mailing Address Taxpayer Services  
P.O. 10457

City State Zip Code  
Des Moines IA 50306

Purpose of Disbursement

Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B9FA06555ED7E45648DB

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2698.68

**C.**

Full Name (Last, First, Middle Initial)

IA Dept Taxation

Mailing Address Taxpayer Services  
P.O. 10457

City State Zip Code  
Des Moines IA 50306

Purpose of Disbursement

Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B19F39E0BE9844E50AD7

Date of Disbursement

/   /

Amount of Each Disbursement this Period

437.49

**SUBTOTAL** of Disbursements This Page (optional) .....

3796.17

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) IL Dept Taxation	<b>Transaction ID:</b> BB31A1C1D37894D2C83E <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 19044	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Springfield State IL Zip Code 62794-9044	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">240.75</td> </tr> </table>	240.75																			
240.75																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) IL Dept Taxation	<b>Transaction ID:</b> B7E21116DCF14416B8DA <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 19044	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Springfield State IL Zip Code 62794-9044	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">125.36</td> </tr> </table>	125.36																			
125.36																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) IRS	<b>Transaction ID:</b> BCFBA6FF3B10746CABE0 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 8530	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Philadelphia State PA Zip Code 19162	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">56016.82</td> </tr> </table>	56016.82																			
56016.82																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**56382.93**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

IRS

Mailing Address P.O. Box 8530

City  
Philadelphia

State  
PA

Zip Code  
19162

Purpose of Disbursement  
Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BE07B9711F40F4C208C4

Date of Disbursement

/   /

Amount of Each Disbursement this Period

24201.31

**B.**

Full Name (Last, First, Middle Initial)

J.V. Squared, LLC

Mailing Address PO BOX 901

City  
Sioux City

State  
IA

Zip Code  
51102

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BC918B650CBBF4B0E887

Date of Disbursement

/   /

Amount of Each Disbursement this Period

370.00

**C.**

Full Name (Last, First, Middle Initial)

MA Dept Taxation

Mailing Address P.O. Box 7010

City  
Boston

State  
MA

Zip Code  
02204

Purpose of Disbursement  
Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BC2D800F8EC674F578B4

Date of Disbursement

/   /

Amount of Each Disbursement this Period

90.27

**SUBTOTAL** of Disbursements This Page (optional) .....

24661.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) MA Dept Taxation	<b>Transaction ID:</b> BBC8FA285845C4AD1A7A <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 7010	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Boston State MA Zip Code 02204	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">30.63</td> </tr> </table>	30.63																			
30.63																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) MD Dept Taxation	<b>Transaction ID:</b> B97785396A82342EE8E4 <b>Date of Disbursement</b>																				
Mailing Address 301 W. Preston Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Baltimore State MD Zip Code 21201	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">413.90</td> </tr> </table>	413.90																			
413.90																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) MD Dept Taxation	<b>Transaction ID:</b> B53E7B84622214EB098D <b>Date of Disbursement</b>																				
Mailing Address 301 W. Preston Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Baltimore State MD Zip Code 21201	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**644.53**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) MidAmerican Energy Mailing Address P.O. Box 8020	<b>Transaction ID:</b> B376B80D6ADB84284A9C <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div>
City Davenport State IA Zip Code 52808-8020 Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>416.01</div>
<b>B.</b> Full Name (Last, First, Middle Initial) NH Dept Taxation Mailing Address 45 Chenell Drive City Concord State NH Zip Code 03301 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> BB4C42DC87BD44C7E8C7 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>472.89</div>
<b>C.</b> Full Name (Last, First, Middle Initial) NH Dept Taxation Mailing Address 45 Chenell Drive City Concord State NH Zip Code 03301 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B9DCF04158E2A49848E3 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>147.33</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

1036.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Northland Trumbull, LLC</p> <p>Mailing Address C/o Northland Investment Corporati P.O. Box 845604</p> <p>City Boston State MA Zip Code 02284</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B15EEAD184F8B453BA9E</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 3850.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) NV Dept Taxation</p> <p>Mailing Address 1550 College Parkway</p> <p>City Carson City State NV Zip Code 89706</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B84560C471E6F4A718DB</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 67.50</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) NV Dept Taxation</p> <p>Mailing Address 1550 College Parkway</p> <p>City Carson City State NV Zip Code 89706</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B2737182B574A47E1932</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 14.46</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

3931.96

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) P B & J Investments	<b>Transaction ID:</b> BD313E66514C846D6B8F <b>Date of Disbursement</b>																				
Mailing Address 1239 First Avenue, SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Cedar Rapids State IA Zip Code 52402	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Rent	<table border="1"> <tr> <td colspan="10">1200.00</td> </tr> </table>	1200.00																			
1200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Petty Cash	<b>Transaction ID:</b> B1E2CE7EB538841F7912 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 51882	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	4		2	0	0	8												
City Washington State DC Zip Code 20077-0001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Petty Cash	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Petty Cash	<b>Transaction ID:</b> B1FE4CD06BB0A470881A <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 270701	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	0	8												
City West Hartford State CT Zip Code 06127	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxis, meals, reimbursement for parking,	<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>	300.00																			
300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"> <tr> <td colspan="10">1700.00</td> </tr> </table>	1700.00																			
1700.00																					
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) PPM	<b>Transaction ID:</b> B59CEFE46C58643F7BB1 <b>Date of Disbursement</b>																				
Mailing Address 108 Emmons Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Hiawatha State IA Zip Code 52233	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Rent	<table border="1"> <tr> <td colspan="10">400.00</td> </tr> </table>	400.00																			
400.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) River City Property Management and Sales, LLC	<b>Transaction ID:</b> BF3CF6F8286DC4711AA2 <b>Date of Disbursement</b>																				
Mailing Address 1550 S. Gilbert Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Iowa City State IA Zip Code 52240	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Rent	<table border="1"> <tr> <td colspan="10">450.00</td> </tr> </table>	450.00																			
450.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) SC Dept Taxation	<b>Transaction ID:</b> B0C5F47F87B034DB2A3A <b>Date of Disbursement</b>																				
Mailing Address SCDOR Withholding	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Columbia State SC Zip Code 29214-0004	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">85.71</td> </tr> </table>	85.71																			
85.71																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**935.71**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<p><b>A.</b> Full Name (Last, First, Middle Initial) SC Dept Taxation</p> <p>Mailing Address SCDOR Withholding</p> <p>City Columbia State SC Zip Code 29214-0004</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B74D32C1A3478405F97C</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 25.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sky Television, Inc.</p> <p>Mailing Address 9033 Dellwood Drive</p> <p>City Vienna State VA Zip Code 22180-6118</p> <p>Purpose of Disbursement Technology Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B1135A50E62A64AFFA96</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 4929.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Steamboat Gardens</p> <p>Mailing Address 1740 Falls Avenue</p> <p>City Waterloo State IA Zip Code 50701-2323</p> <p>Purpose of Disbursement Event Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BD43DA3495629493A87A</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 2 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 219.18</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

5173.18

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Sun Real Estate Investments, LLC</p> <p>Mailing Address 3641 Kimball Avenue</p> <p>City Waterloo State IA Zip Code 50702</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BFF54EF18DA69444F9F8</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 585.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) The Kirkwood</p> <p>Mailing Address 400 Walnut Street</p> <p>City Des Moines State IA Zip Code 50309</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B902FF61C4DCD4881B08</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1555.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) The Soul Searchers</p> <p>Mailing Address 5205 Shriver Avenue</p> <p>City Des Moines State IA Zip Code 50312-2041</p> <p>Purpose of Disbursement Entertainment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B85DF7B43347E4926824</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 600.00</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

2740.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Thunder Road Group

Mailing Address 1010 Wisconsin Avenue NW  
Suite 800

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B0B01A68C2FBB442190A

Date of Disbursement

MM / DD / YYYY  
01 / 01 / 2008

Amount of Each Disbursement this Period

10800.00

**B.**

Full Name (Last, First, Middle Initial)

TiVo Inc.

Mailing Address 2160 Gold Street  
P.O. Box 2160

City Alviso State CA Zip Code 95002-2160

Purpose of Disbursement  
Cable Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B1E517B3A9E3742369AD

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2008

Amount of Each Disbursement this Period

28.03

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

U. S. Postal Service

Mailing Address 800 K Street

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B8496063256B64C9B833

Date of Disbursement

MM / DD / YYYY  
01 / 22 / 2008

Amount of Each Disbursement this Period

2337.00

**SUBTOTAL** of Disbursements This Page (optional) .....

13137.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<p><b>A.</b> Full Name (Last, First, Middle Initial) VA Dept Taxation</p> <p>Mailing Address Payroll Tax Dept. 2220 West Broad St.</p> <p>City Arlington State VA Zip Code 22204</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B1781E8E08A0746A3A82</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 973.86</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) VA Dept Taxation</p> <p>Mailing Address Payroll Tax Dept. 2220 West Broad St.</p> <p>City Arlington State VA Zip Code 22204</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B34DBFFFC57554A13968</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 698.81</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ventures of Iowa, LLC</p> <p>Mailing Address 1020 Central Avenue</p> <p>City Fort Dodge State IA Zip Code 50501</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B7FA35B1D6C5D408AB0B</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1500.00</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3172.67

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address P.O. Box 15041

City  
Worcester

State  
MA

Zip Code  
01615-0023

Purpose of Disbursement  
Telephones

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B4757115BF83145F480D

Date of Disbursement

MM / DD / YYYY  
01 / 03 / 2008

Amount of Each Disbursement this Period

318.29

B.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address P.O. Box 15041

City  
Worcester

State  
MA

Zip Code  
01615-0023

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BBEEA1A536FDC4EA2A43

Date of Disbursement

MM / DD / YYYY  
01 / 03 / 2008

Amount of Each Disbursement this Period

545.99

C.

Full Name (Last, First, Middle Initial)

Verizon Corporate Real Estate

Mailing Address Mail Code FLG1-300  
8800 Adamo Drive

City  
Tampa

State  
FL

Zip Code  
33619

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BC2395965460D48628FA

Date of Disbursement

MM / DD / YYYY  
01 / 22 / 2008

Amount of Each Disbursement this Period

23250.00

SUBTOTAL of Disbursements This Page (optional) .....

24114.28

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Wakonda Village

Mailing Address 1800 Watrose Avenue

City  
Des Moines

State  
IA

Zip Code  
50315

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BD310AEA21E2245B09C9

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

360.00

B.

Full Name (Last, First, Middle Initial)

Washington Promotions & Printing

Mailing Address 5125 MacArthur Blvd. NW  
Suite 14

City  
Washington

State  
DC

Zip Code  
20016

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B33EBBE739D6347F18B5

Date of Disbursement

01 / 22 / 2008

Amount of Each Disbursement this Period

19515.02

C.

Full Name (Last, First, Middle Initial)

Webster Bank

Mailing Address 185 Asylum Street

City  
Hartford

State  
CT

Zip Code  
06103-3401

Purpose of Disbursement  
Loan interest payment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B2455C9526EE244CC9BA

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

4177.74

SUBTOTAL of Disbursements This Page (optional) .....

24052.76

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Nicholas Anderson

Mailing Address 1800 Watrous Apt. 12B

City State Zip Code  
Des Moines IA 50315-3210

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B4890C4517CDB43BBBBE

Date of Disbursement

/   /

Amount of Each Disbursement this Period

820.75

**B.**

Full Name (Last, First, Middle Initial)

Nicholas Anderson

Mailing Address 1800 Watrous Apt. 12B

City State Zip Code  
Des Moines IA 50315-3210

Purpose of Disbursement  
Salary & expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B40E84F59B9E94931A8E

Date of Disbursement

/   /

Amount of Each Disbursement this Period

914.42

**C.**

Full Name (Last, First, Middle Initial)

Mr. Scott Arceneaux

Mailing Address 8516 Hazelwood Drive

City State Zip Code  
Bethesda MD 20814-1408

Purpose of Disbursement  
Refund of ins. pmt.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B409123BC0E8A47819FE

Date of Disbursement

/   /

Amount of Each Disbursement this Period

837.65

**SUBTOTAL** of Disbursements This Page (optional) .....

2572.82

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 55 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Brenda Arredondo	<b>Transaction ID:</b> BDF2C5F633040475982D <b>Date of Disbursement</b>																				
Mailing Address 4241 Siete Leguas Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City El Paso State TX Zip Code 79922-2323	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">972.24</td> </tr> </table>	972.24																			
972.24																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Brenda Arredondo	<b>Transaction ID:</b> B3A121C22C4814AC3827 <b>Date of Disbursement</b>																				
Mailing Address 4241 Siete Leguas Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City El Paso State TX Zip Code 79922-2323	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">245.21</td> </tr> </table>	245.21																			
245.21																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Brian Bailey	<b>Transaction ID:</b> B18117F02EF744A9BA55 <b>Date of Disbursement</b>																				
Mailing Address 250 12th Avenue, Suite 290	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Coralville State IA Zip Code 52241-2912	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">771.00</td> </tr> </table>	771.00																			
771.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**1988.45**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Brian Bailey

Mailing Address 250 12th Avenue, Suite 290

City State Zip Code  
Coralville IA 52241-2912

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BDF6F632F6FA8433BB80

Date of Disbursement

/   /

Amount of Each Disbursement this Period

186.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Marc Beltrame

Mailing Address 3409 SW 44th Place

City State Zip Code  
Des Moines IA 50321-1819

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BE17278B26B8A4707AA3

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1001.13

**C.**

Full Name (Last, First, Middle Initial)

Mr. Marc Beltrame

Mailing Address 3409 SW 44th Place

City State Zip Code  
Des Moines IA 50321-1819

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B467C4E6115354621950

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1001.12

**SUBTOTAL** of Disbursements This Page (optional) .....

2188.75

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Christopher Bowen

Mailing Address 38 South Quaker Lane

City  
West Hartford

State  
CT

Zip Code  
06119-1637

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BFC3A95F26C7F4937B91

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

1355.54

B.

Full Name (Last, First, Middle Initial)

Christopher Bowen

Mailing Address 38 South Quaker Lane

City  
West Hartford

State  
CT

Zip Code  
06119-1637

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B20E703C787534BBC9F6

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

640.38

C.

Full Name (Last, First, Middle Initial)

Jake Braun

Mailing Address 4009 N Kenmore Avenue #1

City  
Chicago

State  
IL

Zip Code  
60613-2037

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B3852BE562D114817A83

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) .....

6995.92

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 58 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

James Breen

Mailing Address 114 Elm Street

City  
Shelburne Falls

State  
MA

Zip Code  
01370

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B923CC6198A9D4A08BA9

Date of Disbursement

/   /

Amount of Each Disbursement this Period

871.62

**B.**

Full Name (Last, First, Middle Initial)

James Breen

Mailing Address 114 Elm Street

City  
Shelburne Falls

State  
MA

Zip Code  
01370

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B6B5504B57B6B488693E

Date of Disbursement

/   /

Amount of Each Disbursement this Period

647.89

**C.**

Full Name (Last, First, Middle Initial)

Robert Brennan

Mailing Address 308 Court Avenue #412

City  
Des Moines

State  
IA

Zip Code  
50309-2210

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BB81C524C7A4A49C08AF

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1433.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2952.51

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Brennan	<b>Transaction ID:</b> B55527319B1AD4DB1B3B <b>Date of Disbursement</b>																				
Mailing Address 308 Court Avenue #412	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Des Moines State IA Zip Code 50309-2210 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1433.00</td> </tr> </table>	1433.00																			
1433.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jacob Breymaier	<b>Transaction ID:</b> B69B2CD4F2318414B883 <b>Date of Disbursement</b>																				
Mailing Address 4061 Grandview Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Toledo State OH Zip Code 43614-3340 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">950.37</td> </tr> </table>	950.37																			
950.37																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Jacob Breymaier	<b>Transaction ID:</b> BA5541A653AA841F1AAF <b>Date of Disbursement</b>																				
Mailing Address 4061 Grandview Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Toledo State OH Zip Code 43614-3340 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">229.63</td> </tr> </table>	229.63																			
229.63																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**2613.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Matt Browner-Hamlin

Mailing Address 1902 R Street, Apt 1 NW

City  
Washington

State  
DC

Zip Code  
20009-1015

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B9D039B75203246458AE

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1492.45

**B.**

Full Name (Last, First, Middle Initial)

Matt Browner-Hamlin

Mailing Address 1902 R Street, Apt 1 NW

City  
Washington

State  
DC

Zip Code  
20009-1015

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BFCDE2279683D451DA28

Date of Disbursement

/   /

Amount of Each Disbursement this Period

437.25

**C.**

Full Name (Last, First, Middle Initial)

Nicole Budzinski

Mailing Address 1115 Grand Avenue

City  
Des Moines

State  
IA

Zip Code  
50309-2909

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B3E524DD7E8F64134AC0

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2355.24

**SUBTOTAL** of Disbursements This Page (optional) .....

4284.94

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 61 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Nicole Budzinski

Mailing Address 1115 Grand Avenue

City  
Des Moines

State  
IA

Zip Code  
50309-2909

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BD0DE4852F4CD4670B55

Date of Disbursement

/   /

Amount of Each Disbursement this Period

855.93

**B.**

Full Name (Last, First, Middle Initial)

Julie Butler

Mailing Address 4912 Mortensen Road #513

City  
Ames

State  
IA

Zip Code  
50014-6206

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B2747D8906B5D4F839E1

Date of Disbursement

/   /

Amount of Each Disbursement this Period

843.62

**C.**

Full Name (Last, First, Middle Initial)

Julie Butler

Mailing Address 4912 Mortensen Road #513

City  
Ames

State  
IA

Zip Code  
50014-6206

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B66C996B8B3764FE28B7

Date of Disbursement

/   /

Amount of Each Disbursement this Period

395.79

**SUBTOTAL** of Disbursements This Page (optional) .....

2095.34

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Matt Butler	<b>Transaction ID:</b> B27F90BA170B54A1D8DE <b>Date of Disbursement</b>																				
Mailing Address 1609 E Capitol St., SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Washington State DC Zip Code 20003-1620 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3</td><td>5</td><td>6</td><td>5</td><td>.</td><td>4</td><td>2</td><td></td><td></td><td></td> </tr> </table>	3	5	6	5	.	4	2													
3	5	6	5	.	4	2															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Matt Butler	<b>Transaction ID:</b> B66F2D1A6BD164188AEE <b>Date of Disbursement</b>																				
Mailing Address 1609 E Capitol St., SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Washington State DC Zip Code 20003-1620 Purpose of Disbursement Salary & expenses Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>4</td><td>2</td><td>4</td><td>6</td><td>.</td><td>8</td><td>4</td><td></td><td></td><td></td> </tr> </table>	4	2	4	6	.	8	4													
4	2	4	6	.	8	4															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Jacqueline Cohen	<b>Transaction ID:</b> B3153D366A8A94C8EA0F <b>Date of Disbursement</b>																				
Mailing Address 1115 Martin Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Cherry Hill State NJ Zip Code 08002-2631 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>9</td><td>7</td><td>2</td><td>.</td><td>2</td><td>4</td><td></td><td></td><td></td><td></td> </tr> </table>	9	7	2	.	2	4														
9	7	2	.	2	4																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**8784.50**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jacqueline Cohen	<b>Transaction ID:</b> B33DC0B3C5DFF4403B2E <b>Date of Disbursement</b>																				
Mailing Address 1115 Martin Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Cherry Hill State NJ Zip Code 08002-2631	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">537.42</td> </tr> </table>	537.42																			
537.42																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Sheryl Cohen	<b>Transaction ID:</b> BC2D032A45F3C42FCA0F <b>Date of Disbursement</b>																				
Mailing Address 2241 North Vermont Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Arlington State VA Zip Code 22207-4032	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">4687.34</td> </tr> </table>	4687.34																			
4687.34																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Sheryl Cohen	<b>Transaction ID:</b> B2F65283A43B142A8830 <b>Date of Disbursement</b>																				
Mailing Address 2241 North Vermont Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Arlington State VA Zip Code 22207-4032	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">4247.08</td> </tr> </table>	4247.08																			
4247.08																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**9471.84**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 64 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Ruth Cox	<b>Transaction ID:</b> B8FE35134390443469B2 <b>Date of Disbursement</b>																				
Mailing Address 1229 First Avenue, SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Cedar Rapids State IA Zip Code 52402-5007	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1</td><td>1</td><td>2</td><td>0</td><td>.</td><td>3</td><td>7</td> </tr> </table>	1	1	2	0	.	3	7													
1	1	2	0	.	3	7															
Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ruth Cox	<b>Transaction ID:</b> B23D8CD363EEF4A7AA28 <b>Date of Disbursement</b>																				
Mailing Address 1229 First Avenue, SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Cedar Rapids State IA Zip Code 52402-5007	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>3</td><td>1</td><td>7</td><td>.</td><td>3</td><td>7</td> </tr> </table>	3	1	7	.	3	7														
3	1	7	.	3	7																
Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Lucy Cox-Chapman	<b>Transaction ID:</b> BF505406086A1426BB5D <b>Date of Disbursement</b>																				
Mailing Address 4530 Connecticut Ave, Apt 702	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Washington State DC Zip Code 20008-4316	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1</td><td>5</td><td>4</td><td>.</td><td>7</td><td>3</td><td>7</td> </tr> </table>	1	5	4	.	7	3	7													
1	5	4	.	7	3	7															
Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**2985.11**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 65 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Lucy Cox-Chapman	<b>Transaction ID:</b> B5F18DD9202C24A448F4 <b>Date of Disbursement</b>																				
Mailing Address 4530 Connecticut Ave, Apt 702	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	2		2	0	0	8												
City Washington State DC Zip Code 20008-4316	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Travel Expenses Candidate Name	<table border="1"> <tr> <td colspan="10">69.40</td> </tr> </table>	69.40																			
69.40																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Lucy Cox-Chapman	<b>Transaction ID:</b> BD13BE6A9F485488E990 <b>Date of Disbursement</b>																				
Mailing Address 4530 Connecticut Ave, Apt 702	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Washington State DC Zip Code 20008-4316	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">532.53</td> </tr> </table>	532.53																			
532.53																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Brenna Crause	<b>Transaction ID:</b> BE088967E1A7644DEA0F <b>Date of Disbursement</b>																				
Mailing Address 24704 Lepley Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Gambier State OH Zip Code 43022-9794	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1001.12</td> </tr> </table>	1001.12																			
1001.12																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**1603.05**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Brenna Crause

Mailing Address 24704 Lepley Road

City State Zip Code  
Gambier OH 43022-9794

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B873984D3943244828C7

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

247.37

**B.**

Full Name (Last, First, Middle Initial)

Kathryn Damato

Mailing Address 10 Blackhawk Lane

City State Zip Code  
West Hartford CT 06117

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B5D0ADBA890DA4E5297D

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

3463.59

**C.**

Full Name (Last, First, Middle Initial)

Kathryn Damato

Mailing Address 10 Blackhawk Lane

City State Zip Code  
West Hartford CT 06117

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B7C68AB3DAA2C4D709E7

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

3219.82

**SUBTOTAL** of Disbursements This Page (optional) .....

6930.78

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)  
John Daniels

Mailing Address 5360 S. Edgewood Circle

City State Zip Code  
Salt Lake City UT 84117-7400

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B688B9DF004D04A799E0

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1001.12

**B.**

Full Name (Last, First, Middle Initial)  
John Daniels

Mailing Address 5360 S. Edgewood Circle

City State Zip Code  
Salt Lake City UT 84117-7400

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B7F05B1C2C9834EEFB4F

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1054.33

**C.**

Full Name (Last, First, Middle Initial)  
Bryan DeAngelis

Mailing Address 367 Hanover Street, Apt. 10

City State Zip Code  
Manchester NH 03104-4965

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B5D89D17620324AAFB0F

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1857.75

**SUBTOTAL** of Disbursements This Page (optional) .....

3913.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Bryan DeAngelis Mailing Address 367 Hanover Street, Apt. 10	<b>Transaction ID:</b> B2171AD8D5824477681D <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 8</div> </div>
City Manchester State NH Zip Code 03104-4965 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2048.51</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Emilie Deans Mailing Address 4316 N. Carlin Springs Road, Apt.	<b>Transaction ID:</b> B9DEE67BE0ACB4C80BC8 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div>
City Arlington State VA Zip Code 22203-2035 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>991.49</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Emilie Deans Mailing Address 4316 N. Carlin Springs Road, Apt.	<b>Transaction ID:</b> B845EF249E2964E1E910 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 8</div> </div>
City Arlington State VA Zip Code 22203-2035 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>383.36</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**3423.36**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Elena DiTraglia	<b>Transaction ID:</b> B4643BC7A4402411B88D <b>Date of Disbursement</b>																				
Mailing Address 379 Elm Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Manchester State NH Zip Code 03101	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">905.22</td> </tr> </table>	905.22																			
905.22																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Elena DiTraglia	<b>Transaction ID:</b> B1BC00DFF193242438FA <b>Date of Disbursement</b>																				
Mailing Address 379 Elm Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Manchester State NH Zip Code 03101	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">517.68</td> </tr> </table>	517.68																			
517.68																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Catya Donovan	<b>Transaction ID:</b> B5FB0F3E31DB244A6877 <b>Date of Disbursement</b>																				
Mailing Address 3641 Kimball Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Waterloo State IA Zip Code 50702-5757	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">820.75</td> </tr> </table>	820.75																			
820.75																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**2243.65**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Catya Donovan

Mailing Address 3641 Kimball Avenue

City Waterloo State IA Zip Code 50702-5757

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B570A4A47F88D47B79DE

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2008

Amount of Each Disbursement this Period

197.89

**B.**

Full Name (Last, First, Middle Initial)

Mr. Sean Downey

Mailing Address 30 Hanover Street, #403

City Manchester State NH Zip Code 03101-2241

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B36FC367D87434F4B9A8

Date of Disbursement

MM / DD / YYYY  
01 / 01 / 2008

Amount of Each Disbursement this Period

2099.04

**C.**

Full Name (Last, First, Middle Initial)

Mr. Sean Downey

Mailing Address 30 Hanover Street, #403

City Manchester State NH Zip Code 03101-2241

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BCD70A06C84CE422B9F7

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2008

Amount of Each Disbursement this Period

525.49

**SUBTOTAL** of Disbursements This Page (optional) .....

2822.42

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 71 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Ryan Drajewicz Mailing Address 11A Bretton Road	<b>Transaction ID:</b> B91ED0EB97240424982E <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div>
City Middletown State CT Zip Code 06457-4109 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>1777.54</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Ryan Drajewicz Mailing Address 11A Bretton Road City Middletown State CT Zip Code 06457-4109 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B473DFEDB0B704C829AE <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>466.78</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Nicole Enfield Mailing Address 328 South Alfred Street City Alexandria State VA Zip Code 22314-3641 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B981E1BC17DBB4A7A855 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2001.64</div>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>4245.96</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 72 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Nicole Enfield

Mailing Address 328 South Alfred Street

City Alexandria State VA Zip Code 22314-3641

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B9E00B9CDA1024FD0A94

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

725.99

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jonathan Epstein

Mailing Address 2323 Watside Drive

City Atlanta State GA Zip Code 30319-4011

Purpose of Disbursement  
Political Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B5D5319F308524D50BCB

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Amy Farrar

Mailing Address 1425 Winding Way Lane

City Silver Spring State MD Zip Code 20902-1451

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B28CDA7C6C24D4E40BD8

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

247.12

**SUBTOTAL** of Disbursements This Page (optional) .....

2473.11

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 73 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)  
Nathaniel Feldman

Mailing Address 1540 Central Avenue

City State Zip Code  
Dubuque IA 52001-4843

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BDEC58DB6523F46428C1

Date of Disbursement

/   /

Amount of Each Disbursement this Period

792.87

**B.**

Full Name (Last, First, Middle Initial)  
Nathaniel Feldman

Mailing Address 1540 Central Avenue

City State Zip Code  
Dubuque IA 52001-4843

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B9AB8616A5A0147B5883

Date of Disbursement

/   /

Amount of Each Disbursement this Period

480.19

**C.**

Full Name (Last, First, Middle Initial)  
Emily Fetting

Mailing Address 4601 Roland Avenue

City State Zip Code  
Baltimore MD 21210-2542

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BE04442848AB741AC8A9

Date of Disbursement

/   /

Amount of Each Disbursement this Period

991.49

**SUBTOTAL** of Disbursements This Page (optional) .....

2264.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 74 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Emily Fetting	<b>Transaction ID:</b> BD3E85151089E464E861 <b>Date of Disbursement</b>																				
Mailing Address 4601 Roland Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Baltimore State MD Zip Code 21210-2542	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1271.50</td> </tr> </table>	1271.50																			
1271.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Katie Finn	<b>Transaction ID:</b> B6AF50894E1DB4B34ABF <b>Date of Disbursement</b>																				
Mailing Address 2864 Coral Court, Apt#104	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Coralville State IA Zip Code 52241-2823	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1276.62</td> </tr> </table>	1276.62																			
1276.62																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Katie Finn	<b>Transaction ID:</b> BA47EFB3C2B7D4B3C878 <b>Date of Disbursement</b>																				
Mailing Address 2864 Coral Court, Apt#104	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Coralville State IA Zip Code 52241-2823	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">234.51</td> </tr> </table>	234.51																			
234.51																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**2782.63**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 75 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Colleen Flanagan	<b>Transaction ID:</b> B03C99AF094B64A86A3B <b>Date of Disbursement</b>																				
Mailing Address 1601 18th Street, Apt 515, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Washington State DC Zip Code 20009-2515	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">2255.02</td> </tr> </table>	2255.02																			
2255.02																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Colleen Flanagan	<b>Transaction ID:</b> B75EC71C2DE9942F694D <b>Date of Disbursement</b>																				
Mailing Address 1601 18th Street, Apt 515, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Washington State DC Zip Code 20009-2515	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">801.41</td> </tr> </table>	801.41																			
801.41																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Vincent Frillici	<b>Transaction ID:</b> BAF838FDD5490443BAB1 <b>Date of Disbursement</b>																				
Mailing Address 1100 H St., Ste.940 NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Washington State DC Zip Code 20005-5476	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">3229.10</td> </tr> </table>	3229.10																			
3229.10																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**6285.53**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. Vincent Frillici

Mailing Address 1100 H St., Ste.940 NW

City  
Washington

State  
DC

Zip Code  
20005-5476

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B2E25FA95193144B8BC5

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3229.11

**B.**

Full Name (Last, First, Middle Initial)

David Fuller

Mailing Address 379 Elm Street

City  
Manchester

State  
NH

Zip Code  
03101-2708

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B9D1D8D566DB44391AA8

Date of Disbursement

/   /

Amount of Each Disbursement this Period

849.75

**C.**

Full Name (Last, First, Middle Initial)

David Fuller

Mailing Address 379 Elm Street

City  
Manchester

State  
NH

Zip Code  
03101-2708

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BA2C6ABD9D5224560B77

Date of Disbursement

/   /

Amount of Each Disbursement this Period

414.49

**SUBTOTAL** of Disbursements This Page (optional) .....

4493.35

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Steven Gerencser

Mailing Address 756 Straw Hill Road

City Manchester State NH Zip Code 03104-1681

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B0D163A6AA20A4D4B9A3

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

2194.73

**B.**

Full Name (Last, First, Middle Initial)

Steven Gerencser

Mailing Address 756 Straw Hill Road

City Manchester State NH Zip Code 03104-1681

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B04E191F28623420ABE9

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

438.52

**C.**

Full Name (Last, First, Middle Initial)

Mr. Samuel Gilchrist

Mailing Address 5839 N Guilford Avenue

City Indianapolis State IN Zip Code 46220-2623

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B49C670DE82EC462BB49

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

950.37

**SUBTOTAL** of Disbursements This Page (optional) .....

3583.62

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 78 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Samuel Gilchrist	<b>Transaction ID:</b> BD6333FABD71B4DBABB8 <b>Date of Disbursement</b>																				
Mailing Address 5839 N Guilford Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Indianapolis State IN Zip Code 46220-2623 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">998.37</td> </tr> </table>	998.37																			
998.37																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Euginia Gluzberg	<b>Transaction ID:</b> B182FA68C204C46B9BD8 <b>Date of Disbursement</b>																				
Mailing Address 1380 Paradise Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Hamden State CT Zip Code 06514-1017 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">987.02</td> </tr> </table>	987.02																			
987.02																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Euginia Gluzberg	<b>Transaction ID:</b> B71D6F5BD03DE4DCB921 <b>Date of Disbursement</b>																				
Mailing Address 1380 Paradise Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Hamden State CT Zip Code 06514-1017 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1313.73</td> </tr> </table>	1313.73																			
1313.73																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3299.12**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Jennifer Goodman	<b>Transaction ID:</b> B9DAF7D486C3A457C878 <b>Date of Disbursement</b>																				
Mailing Address 1615 Q Street, Nw, #806	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">2387.39</td> </tr> </table>	2387.39																			
2387.39																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Jennifer Goodman	<b>Transaction ID:</b> B218AD6944ABF40E1B71 <b>Date of Disbursement</b>																				
Mailing Address 1615 Q Street, Nw, #806	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">939.20</td> </tr> </table>	939.20																			
939.20																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Matthew Greene	<b>Transaction ID:</b> BCC9042D4F58E46579B1 <b>Date of Disbursement</b>																				
Mailing Address 73 Surrey Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Avon State CT Zip Code 06001-2417	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">849.75</td> </tr> </table>	849.75																			
849.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**4176.34**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Matthew Greene

Mailing Address 73 Surrey Lane

City Avon State CT Zip Code 06001-2417

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BFCCEFDEA315B4CA5B4A

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

197.89

**B.**

Full Name (Last, First, Middle Initial)  
Debra Greenspan

Mailing Address 1703 East West Highway #511

City Silver Spring State MD Zip Code 20910-3031

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B9F4E70B80F9E406693A

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

1434.13

**C.**

Full Name (Last, First, Middle Initial)  
Debra Greenspan

Mailing Address 1703 East West Highway #511

City Silver Spring State MD Zip Code 20910-3031

Purpose of Disbursement  
Travel Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B218E3AE6FB144158807

Date of Disbursement

01 / 03 / 2008

Amount of Each Disbursement this Period

269.08

**SUBTOTAL** of Disbursements This Page (optional) .....

1901.10

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 81 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Debra Greenspan

Mailing Address 1703 East West Highway #511

City State Zip Code  
Silver Spring MD 20910-3031

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BBD61B47D655847CFA7B

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1418.89

**B.**

Full Name (Last, First, Middle Initial)

Este Griffith

Mailing Address 503 E. 35th Street

City State Zip Code  
Baltimore MD 21218-2550

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B96E62268C9AE42E2841

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2399.87

**C.**

Full Name (Last, First, Middle Initial)

Este Griffith

Mailing Address 503 E. 35th Street

City State Zip Code  
Baltimore MD 21218-2550

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BBC14C14914AB47FAA03

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2643.46

**SUBTOTAL** of Disbursements This Page (optional) .....

6462.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 82 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Jena Gross

Mailing Address 241 North Street

City  
Manchester

State  
NH

Zip Code  
03104

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BF792BDEBB7DE4386993

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

806.00

B.

Full Name (Last, First, Middle Initial)

Jena Gross

Mailing Address 241 North Street

City  
Manchester

State  
NH

Zip Code  
03104

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BE1819DD395F74B9DB9B

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

832.50

C.

Full Name (Last, First, Middle Initial)

Mr. Matthew Gully

Mailing Address 285 Bentwood Drive

City  
Spring Branch

State  
TX

Zip Code  
78070-6027

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BD423F4924C2343E38A2

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

1001.12

SUBTOTAL of Disbursements This Page (optional) .....

2639.62

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 83 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Matthew Gully	<b>Transaction ID:</b> B641A12E35BD843B484D <b>Date of Disbursement</b>																				
Mailing Address 285 Bentwood Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Spring Branch State TX Zip Code 78070-6027 Purpose of Disbursement Salary Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>247.37</td> </tr> </table>	247.37																			
247.37																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Tim Harding	<b>Transaction ID:</b> B0A45AD2C6B1A4C9B83E <b>Date of Disbursement</b>																				
Mailing Address 317 Buena Vista Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	4		2	0	0	8												
City Council Bluffs State IA Zip Code 51503-1743 Purpose of Disbursement Bus Driver and Expenses Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>3392.56</td> </tr> </table>	3392.56																			
3392.56																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Tim Harding	<b>Transaction ID:</b> B45EFC EE534E74C989A4 <b>Date of Disbursement</b>																				
Mailing Address 317 Buena Vista Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	8		2	0	0	8												
City Council Bluffs State IA Zip Code 51503-1743 Purpose of Disbursement Travel Expenses Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>344.15</td> </tr> </table>	344.15																			
344.15																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3984.08**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 84 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Patrick Hart	<b>Transaction ID:</b> B2EF077F42C864B04AE5 <b>Date of Disbursement</b>																				
Mailing Address 3536 Stafford Street #132	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City State Zip Code Arlington VA 22206-1843	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">3541.95</td> </tr> </table>	3541.95																			
3541.95																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Patrick Hart	<b>Transaction ID:</b> BFD053794AC07459A96E <b>Date of Disbursement</b>																				
Mailing Address 3536 Stafford Street #132	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City State Zip Code Arlington VA 22206-1843	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">3811.61</td> </tr> </table>	3811.61																			
3811.61																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Nigel Henry	<b>Transaction ID:</b> B4111EF50AEC943588D0 <b>Date of Disbursement</b>																				
Mailing Address 540 Memorial Drive, Apt. 1409	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City State Zip Code Cambridge MA 02139-4903	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1582.88</td> </tr> </table>	1582.88																			
1582.88																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**8936.44**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 85 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Nigel Henry	<b>Transaction ID:</b> BCD94D5A52DCE40B69B8 <b>Date of Disbursement</b>																				
Mailing Address 540 Memorial Drive, Apt. 1409	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	2		2	0	0	8												
City Cambridge State MA Zip Code 02139-4903	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Office Expenses Candidate Name <span style="float: right;">Category/ Type</span>	<table border="1"> <tr> <td colspan="10">142.72</td> </tr> </table>	142.72																			
142.72																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Nigel Henry	<b>Transaction ID:</b> B44948DB6CCDF4349945 <b>Date of Disbursement</b>																				
Mailing Address 540 Memorial Drive, Apt. 1409	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Cambridge State MA Zip Code 02139-4903	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name <span style="float: right;">Category/ Type</span>	<table border="1"> <tr> <td colspan="10">1177.17</td> </tr> </table>	1177.17																			
1177.17																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Amos Hochstein	<b>Transaction ID:</b> B66D0A410C76C486994A <b>Date of Disbursement</b>																				
Mailing Address 2318 Ashmead Place NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Washington State DC Zip Code 20009	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name <span style="float: right;">Category/ Type</span>	<table border="1"> <tr> <td colspan="10">4110.55</td> </tr> </table>	4110.55																			
4110.55																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**5430.44**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 86 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Amos Hochstein

Mailing Address 2318 Ashmead Place NW

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B460443AFDA554FE384D

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

2888.97

**B.**

Full Name (Last, First, Middle Initial)  
Kade Hoppenworth

Mailing Address 816 4th Street

City Parkersburg State IA Zip Code 50665-1045

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B0A4F4CDEC43A4FC0814

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

316.66

**C.**

Full Name (Last, First, Middle Initial)  
David Jacobson

Mailing Address 1915 Grand Avenue

City Des Moines State IA Zip Code 50309

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BF1065660EA224CF5AA0

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

1800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5005.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 87 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Henry Johnson	<b>Transaction ID:</b> B53D08350E4E24E7F800 <b>Date of Disbursement</b>																				
Mailing Address 504 Nebraska Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City State Zip Code Sioux City IA 51101-1306	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">792.87</td> </tr> </table>	792.87																			
792.87																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Henry Johnson	<b>Transaction ID:</b> B7B37919D6A00474D934 <b>Date of Disbursement</b>																				
Mailing Address 504 Nebraska Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City State Zip Code Sioux City IA 51101-1306	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">197.89</td> </tr> </table>	197.89																			
197.89																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jennie Johnson	<b>Transaction ID:</b> B79BF997D08024163831 <b>Date of Disbursement</b>																				
Mailing Address 379 Elm Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City State Zip Code Manchester NH 03101-2708	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">927.10</td> </tr> </table>	927.10																			
927.10																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1917.86

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Jennie Johnson

Mailing Address 379 Elm Street

City  
Manchester

State  
NH

Zip Code  
03101-2708

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B731DB78076E54281BE0

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

217.68

B.

Full Name (Last, First, Middle Initial)

David Joseph

Mailing Address 1115 Grand Avenue

City  
Des Moines

State  
IA

Zip Code  
50319-9006

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BA7ED0DA15FFB48398A0

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

1825.38

C.

Full Name (Last, First, Middle Initial)

David Joseph

Mailing Address 1115 Grand Avenue

City  
Des Moines

State  
IA

Zip Code  
50319-9006

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B7D896543694E4724B92

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

663.51

SUBTOTAL of Disbursements This Page (optional) .....

2706.57

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. Peter Judge

Mailing Address 9916 South Hoyne

City  
Chicago

State  
IL

Zip Code  
60643-1816

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B2855B2C7D8334901B63

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

1010.62

**B.**

Full Name (Last, First, Middle Initial)

Mr. Peter Judge

Mailing Address 9916 South Hoyne

City  
Chicago

State  
IL

Zip Code  
60643-1816

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BAAF79338BCBA4BDDDB43

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

702.60

**C.**

Full Name (Last, First, Middle Initial)

Brad Kaltenheuser

Mailing Address P.O. Box 2464

City  
Ames

State  
IA

Zip Code  
50010-2464

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B7C966F8879C8460A946

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

450.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2163.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 90 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Maura Keefe	<b>Transaction ID:</b> B0ADB4C6867DB40B8824 <b>Date of Disbursement</b>																				
Mailing Address 70 Torsey Shores Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Readfield State ME Zip Code 04355-3767	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Political Consulting	<table border="1"> <tr> <td colspan="10">11250.00</td> </tr> </table>	11250.00																			
11250.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Dana Kelly	<b>Transaction ID:</b> BD185711DAD2048E1B9D <b>Date of Disbursement</b>																				
Mailing Address 6 Whitman Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Somerville State MA Zip Code 02144-1616	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">2062.58</td> </tr> </table>	2062.58																			
2062.58																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Dana Kelly	<b>Transaction ID:</b> BACA80D17A0384875956 <b>Date of Disbursement</b>																				
Mailing Address 6 Whitman Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	2		2	0	0	8												
City Somerville State MA Zip Code 02144-1616	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Food & Beverage, Mileage	<table border="1"> <tr> <td colspan="10">173.02</td> </tr> </table>	173.02																			
173.02																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**13485.60**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Dana Kelly Mailing Address 6 Whitman Street	<b>Transaction ID:</b> BEF97A85684994086885 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 8</div> </div>
City State Zip Code Somerville MA 02144-1616 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>662.13</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Tonja Kilby Mailing Address 4243 E Douglas City State Zip Code Des Moines IA 50317 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> BF55E5AD36EA4422FAFB <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>972.24</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Tonja Kilby Mailing Address 4243 E Douglas City State Zip Code Des Moines IA 50317 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> BF0BFC63631664B15836 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>270.21</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1904.58

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Al Killeffer Mailing Address 1115 Grand Avenue	<b>Transaction ID:</b> BF974B990CC7E484D9B3 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div>
City Des Moines State IA Zip Code 50309-2909 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>792.87</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Al Killeffer Mailing Address 1115 Grand Avenue City Des Moines State IA Zip Code 50309-2909 Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B70B1848B54E742519B3 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>600.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Al Killeffer Mailing Address 1115 Grand Avenue City Des Moines State IA Zip Code 50309-2909 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B19C6AF8D763944EEBAC <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>761.14</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

2154.01

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 93 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Jason Kingsbury	<b>Transaction ID:</b> B84CFB80C8A7747E3B20 <b>Date of Disbursement</b>																				
Mailing Address 11577 Wheatonville Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
<table border="1"> <tr> <td>City Elberfeld</td> <td>State IN</td> <td>Zip Code 47613-9020</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Salary</td> <td rowspan="2">Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Elberfeld	State IN	Zip Code 47613-9020	Purpose of Disbursement Salary		Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>950.37</td> </tr> </table>	950.37											
City Elberfeld	State IN	Zip Code 47613-9020																			
Purpose of Disbursement Salary		Category/ Type																			
Candidate Name																					
950.37																					
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State: District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jason Kingsbury	<b>Transaction ID:</b> BE9C048EA70E14A458C8 <b>Date of Disbursement</b>																				
Mailing Address 11577 Wheatonville Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
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City Elberfeld	State IN	Zip Code 47613-9020																			
Purpose of Disbursement Salary		Category/ Type																			
Candidate Name																					
587.53																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td>           2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:																
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State: District:																					
<b>C.</b> Full Name (Last, First, Middle Initial) Jeremy Knapp	<b>Transaction ID:</b> B682D00514B4443429D8 <b>Date of Disbursement</b>																				
Mailing Address 316 Washington Vista	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
<table border="1"> <tr> <td>City Vista</td> <td>State CA</td> <td>Zip Code 92804</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Salary</td> <td rowspan="2">Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Vista	State CA	Zip Code 92804	Purpose of Disbursement Salary		Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>792.87</td> </tr> </table>	792.87											
City Vista	State CA	Zip Code 92804																			
Purpose of Disbursement Salary		Category/ Type																			
Candidate Name																					
792.87																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td>           2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:																
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<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**2330.77**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 94 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Jeremy Knapp

Mailing Address 316 Washington Vista

City State Zip Code  
Vista CA 92804

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B26DD8489DD074A0A84A

Date of Disbursement

/   /

Amount of Each Disbursement this Period

522.89

**B.**

Full Name (Last, First, Middle Initial)

Mr. Henry Leventis

Mailing Address 152 Grove Street

City State Zip Code  
Charleston SC 29403-3636

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B7F1B3439EE8041D7B61

Date of Disbursement

/   /

Amount of Each Disbursement this Period

905.22

**C.**

Full Name (Last, First, Middle Initial)

Mr. Henry Leventis

Mailing Address 152 Grove Street

City State Zip Code  
Charleston SC 29403-3636

Purpose of Disbursement  
Mileage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B7898C3CA95AB44829A1

Date of Disbursement

/   /

Amount of Each Disbursement this Period

133.20

**SUBTOTAL** of Disbursements This Page (optional) .....

1561.31

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 95 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Henry Leventis	<b>Transaction ID:</b> BBEDCEC3D7A704A48A14 <b>Date of Disbursement</b>																				
Mailing Address 152 Grove Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
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City Charleston	State SC	Zip Code 29403-3636																			
Purpose of Disbursement Salary		<input type="text"/> Category/ Type																			
Candidate Name																					
285.48																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) Justin Lindsay	<b>Transaction ID:</b> BF0D877295B0A4A62924 <b>Date of Disbursement</b>																				
Mailing Address 1115 Grand Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
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City Des Moines	State IA	Zip Code 50309-2909																			
Purpose of Disbursement Salary		<input type="text"/> Category/ Type																			
Candidate Name																					
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Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:																					
<b>C.</b> Full Name (Last, First, Middle Initial) Justin Lindsay	<b>Transaction ID:</b> BD555EC15AEEF4562915 <b>Date of Disbursement</b>																				
Mailing Address 1115 Grand Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
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<table border="1"> <tr> <td>City Des Moines</td> <td>State IA</td> <td>Zip Code 50309-2909</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Salary</td> <td rowspan="2"> <input type="text"/> Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Des Moines	State IA	Zip Code 50309-2909	Purpose of Disbursement Salary		<input type="text"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>346.32</td> </tr> </table>	346.32											
City Des Moines	State IA	Zip Code 50309-2909																			
Purpose of Disbursement Salary		<input type="text"/> Category/ Type																			
Candidate Name																					
346.32																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:																					

**SUBTOTAL** of Disbursements This Page (optional) .....

1987.34

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 96 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Megan Lubin Mailing Address 9543 University Avenue, Apt. 3	<b>Transaction ID:</b> B96D8A8389846465BBCB <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	0	1	/	2	0	0	8										
M	M	/	D	D	/	Y	Y	Y	Y																						
0	1	/	0	1	/	2	0	0	8																						
City Clive State IA Zip Code 50325-6359 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">792.87</td> </tr> </table>	792.87																													
792.87																															
<b>B.</b> Full Name (Last, First, Middle Initial) Megan Lubin Mailing Address 9543 University Avenue, Apt. 3 City Clive State IA Zip Code 50325-6359 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B61446B2EFEF842FF955 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">326.89</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	5	/	2	0	0	8	326.89									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	1	/	1	5	/	2	0	0	8																						
326.89																															
<b>C.</b> Full Name (Last, First, Middle Initial) Brad Main Mailing Address 504 Nebraska City Sioux City State IA Zip Code 51101-1306 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B7E1F7307DAA14D3FAD7 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">1001.12</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	0	1	/	2	0	0	8	1001.12									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	1	/	0	1	/	2	0	0	8																						
1001.12																															

**SUBTOTAL** of Disbursements This Page (optional) .....

**2120.88**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 97 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Brad Main

Mailing Address 504 Nebraska

City  
Sioux City

State  
IA

Zip Code  
51101-1306

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B5A2C0B7EB41742E9916

Date of Disbursement

/   /

Amount of Each Disbursement this Period

247.37

**B.**

Full Name (Last, First, Middle Initial)

Ryan Mann

Mailing Address 2410 Chamberlain #3

City  
Ames

State  
IA

Zip Code  
50014-7283

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BC9268361C98647A9AA3

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1001.12

**C.**

Full Name (Last, First, Middle Initial)

Ryan Mann

Mailing Address 2410 Chamberlain #3

City  
Ames

State  
IA

Zip Code  
50014-7283

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B726AE38ED99945BAB99

Date of Disbursement

/   /

Amount of Each Disbursement this Period

247.37

**SUBTOTAL** of Disbursements This Page (optional) .....

1495.86

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jason Mathews

**Transaction ID:** BFA6D7F7F40B647CEB87

Date of Disbursement

/   /

Mailing Address 1042 North Wood Street, Apt 3

Amount of Each Disbursement this Period

City Chicago State IL Zip Code 60622-7452

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jason Mathews

**Transaction ID:** B76BF1C3B625B404FBFD

Date of Disbursement

/   /

Mailing Address 1042 North Wood Street, Apt 3

Amount of Each Disbursement this Period

City Chicago State IL Zip Code 60622-7452

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)

Travis Mattox

**Transaction ID:** B97227F1F95EF43EF8DE

Date of Disbursement

/   /

Mailing Address 1020 N Quincy Street

Amount of Each Disbursement this Period

City Arlington State VA Zip Code 22201-4663

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 99 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Travis Mattox	<b>Transaction ID:</b> BECA906F7128D4FDE8F7 <b>Date of Disbursement</b>																				
Mailing Address 1020 N Quincy Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Arlington State VA Zip Code 22201-4663	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">300.41</td> </tr> </table>	300.41																			
300.41																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Kevin McTigue	<b>Transaction ID:</b> B2328A1B11DA24F9582D <b>Date of Disbursement</b>																				
Mailing Address 2725 Connecticut Avenue, NW, Apt.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Washington State DC Zip Code 20008-5306	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1355.54</td> </tr> </table>	1355.54																			
1355.54																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Kevin McTigue	<b>Transaction ID:</b> B0866B2434724467589D <b>Date of Disbursement</b>																				
Mailing Address 2725 Connecticut Avenue, NW, Apt.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Washington State DC Zip Code 20008-5306	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">346.32</td> </tr> </table>	346.32																			
346.32																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

2002.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 100 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

James Milliken

Mailing Address 1417 D Street NE

City  
Washington

State  
DC

Zip Code  
20002-5401

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BCB60F6FE5B044403AF6

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

1288.31

**B.**

Full Name (Last, First, Middle Initial)

James Milliken

Mailing Address 1417 D Street NE

City  
Washington

State  
DC

Zip Code  
20002-5401

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B86AAB696A78A4D07ACF

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

327.66

**C.**

Full Name (Last, First, Middle Initial)

Erik Moe

Mailing Address 1416 West Argyle Street, Apt. 3

City  
Chicago

State  
IL

Zip Code  
60640-3503

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B5A039E6C203F449BB4B

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

1450.06

**SUBTOTAL** of Disbursements This Page (optional) .....

3066.03

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Kristina Mueller Mailing Address 379 Elm Street	<b>Transaction ID:</b> BED48EFA31EE14D019B1 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div>
City State Zip Code Manchester NH 03101 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>905.22</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Gregory Neil Mailing Address 1628 Rosemont Dr City State Zip Code Fort Wayne IN 46808 Purpose of Disbursement Office Expenses & Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B5AFC29B200854C9AA84 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>789.50</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Dan O'Hara Mailing Address 10607 Delfield Court City State Zip Code Laurel MD 20723-1270 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> BB43A44CB24B4408EA80 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>997.20</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2691.92**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Dan O'Hara	<b>Transaction ID:</b> B013D2B3983034A1F904 <b>Date of Disbursement</b>																				
Mailing Address 10607 Delfield Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City State Zip Code Laurel MD 20723-1270	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">472.42</td> </tr> </table>	472.42																			
472.42																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Joseph Phillips	<b>Transaction ID:</b> B1802DF61A3FB4B18886 <b>Date of Disbursement</b>																				
Mailing Address 25949 SE 37th Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City State Zip Code Issaquah WA 98029-7751	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">608.68</td> </tr> </table>	608.68																			
608.68																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Joseph Phillips	<b>Transaction ID:</b> BC1820461EDDD45708AD <b>Date of Disbursement</b>																				
Mailing Address 25949 SE 37th Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City State Zip Code Issaquah WA 98029-7751	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">490.03</td> </tr> </table>	490.03																			
490.03																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1571.13

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 103 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. Matthew Pierson

Mailing Address 438 New Jersey Ave, SE

City Washington State DC Zip Code 20003-4008

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B59125D0C1C5A4A58B92

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

1597.18

**B.**

Full Name (Last, First, Middle Initial)

Mr. Matthew Pierson

Mailing Address 438 New Jersey Ave, SE

City Washington State DC Zip Code 20003-4008

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B350458BC243C46DEA70

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

1673.05

**C.**

Full Name (Last, First, Middle Initial)

Mario Piscatella

Mailing Address 2000 Outer Drive, Apt 535

City Sioux City State IA Zip Code 51104-1575

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B7305799B1C8E4CFABBA

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

1355.54

**SUBTOTAL** of Disbursements This Page (optional) .....

4625.77

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 104 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Mario Piscatella	<b>Transaction ID:</b> B8DDB2AE48B45418DB46 <b>Date of Disbursement</b>																				
Mailing Address 2000 Outer Drive, Apt 535	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City State Zip Code Sioux City IA 51104-1575	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1090.21</td> </tr> </table>	1090.21																			
1090.21																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Karen Polet	<b>Transaction ID:</b> BE13F85CE87CA46EF8D6 <b>Date of Disbursement</b>																				
Mailing Address 1725 Winding Hills Drive #305	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City State Zip Code Davenport IA 52806	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">792.87</td> </tr> </table>	792.87																			
792.87																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Karen Polet	<b>Transaction ID:</b> B4D3E2EF366CA449BA7A <b>Date of Disbursement</b>																				
Mailing Address 1725 Winding Hills Drive #305	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City State Zip Code Davenport IA 52806	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">197.89</td> </tr> </table>	197.89																			
197.89																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

2080.97

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 105 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Phillip J Quinlan

Mailing Address 2575 Five Mile Road

City  
Allegany

State  
NY

Zip Code  
14706-9697

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BBC24A3DCA9014932AB1

Date of Disbursement

/   /

Amount of Each Disbursement this Period

849.75

**B.**

Full Name (Last, First, Middle Initial)

Phillip J Quinlan

Mailing Address 2575 Five Mile Road

City  
Allegany

State  
NY

Zip Code  
14706-9697

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B217535C83D5449139EE

Date of Disbursement

/   /

Amount of Each Disbursement this Period

324.49

**C.**

Full Name (Last, First, Middle Initial)

Matthew Rado

Mailing Address 816 Elm Street, PMR 222

City  
Manchester

State  
NH

Zip Code  
03101-2105

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B4DC9A581EBE2482D9EF

Date of Disbursement

/   /

Amount of Each Disbursement this Period

849.75

**SUBTOTAL** of Disbursements This Page (optional) .....

2023.99

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 106 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Matthew Rado	<b>Transaction ID:</b> B4F86ADEC7AF545F1B36 <b>Date of Disbursement</b>																				
Mailing Address 816 Elm Street, PMR 222	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Manchester State NH Zip Code 03101-2105	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">339.69</td> </tr> </table>	339.69																			
339.69																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Benjamin Rohrbaugh	<b>Transaction ID:</b> BFEA3B0B5EA254896B49 <b>Date of Disbursement</b>																				
Mailing Address 1800 Watrous Drive, Apt AD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Des Moines State IA Zip Code 50315-3265	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1739.75</td> </tr> </table>	1739.75																			
1739.75																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Benjamin Rohrbaugh	<b>Transaction ID:</b> B23227ECB7A964414AE1 <b>Date of Disbursement</b>																				
Mailing Address 1800 Watrous Drive, Apt AD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Des Moines State IA Zip Code 50315-3265	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">434.87</td> </tr> </table>	434.87																			
434.87																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**2514.31**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 107 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Kelly Jean Ronan	<b>Transaction ID:</b> B70CA083BF6B54995A90 <b>Date of Disbursement</b>																				
Mailing Address 8811 Colesville Road, #424	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Silver Spring State MD Zip Code 20910-4332 Purpose of Disbursement Salary Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>997.20</td> </tr> </table>	997.20																			
997.20																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Kelly Jean Ronan	<b>Transaction ID:</b> B730EB1A9300D4E7ABC3 <b>Date of Disbursement</b>																				
Mailing Address 8811 Colesville Road, #424	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Silver Spring State MD Zip Code 20910-4332 Purpose of Disbursement Salary Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1476.98</td> </tr> </table>	1476.98																			
1476.98																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jon Schaefer	<b>Transaction ID:</b> BAB9604FDE0124866851 <b>Date of Disbursement</b>																				
Mailing Address 1540 Central Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Dubuque State IA Zip Code 52001-4843 Purpose of Disbursement Salary Candidate Name	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>792.87</td> </tr> </table>	792.87																			
792.87																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3267.05**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 108 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)  
Jon Schaefer

Mailing Address 1540 Central Avenue

City State Zip Code  
Dubuque IA 52001-4843

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BF2049F50F4EB41E3A76

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1376.58

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Brett Schenker

Mailing Address 1045 North Utah Street, Apt. 204

City State Zip Code  
Arlington VA 22201-5752

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B9BA561C584C84177AAD

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1148.44

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Brett Schenker

Mailing Address 1045 North Utah Street, Apt. 204

City State Zip Code  
Arlington VA 22201-5752

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B4C7ED77F82D5416B98E

Date of Disbursement

/   /

Amount of Each Disbursement this Period

994.58

**SUBTOTAL** of Disbursements This Page (optional) .....

3519.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 109 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Melissa Scully

Mailing Address 4 Pine Drive

City  
Unionville

State  
CT

Zip Code  
06085-1520

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B2E529FD2AD4B486AADF

Date of Disbursement

/   /

Amount of Each Disbursement this Period

965.15

**B.**

Full Name (Last, First, Middle Initial)

Ms. Melissa Scully

Mailing Address 4 Pine Drive

City  
Unionville

State  
CT

Zip Code  
06085-1520

Purpose of Disbursement  
Mileage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B2C93251341484DF1A5D

Date of Disbursement

/   /

Amount of Each Disbursement this Period

108.90

**C.**

Full Name (Last, First, Middle Initial)

Ms. Melissa Scully

Mailing Address 4 Pine Drive

City  
Unionville

State  
CT

Zip Code  
06085-1520

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B2AF836FC9BFB45C8A61

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1057.13

**SUBTOTAL** of Disbursements This Page (optional) .....

2131.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 110 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Meyyappan Sevugan	<b>Transaction ID:</b> B02CF07E8A7B74A3EBBF <b>Date of Disbursement</b>																				
Mailing Address 5415 N Sheridan Road, #3503	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Chicago State IL Zip Code 60640-1986	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">3629.89</td> </tr> </table>	3629.89																			
3629.89																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Meyyappan Sevugan	<b>Transaction ID:</b> B8C08AB54F16041188F9 <b>Date of Disbursement</b>																				
Mailing Address 5415 N Sheridan Road, #3503	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Chicago State IL Zip Code 60640-1986	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">2683.35</td> </tr> </table>	2683.35																			
2683.35																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Josh Shulman	<b>Transaction ID:</b> B00899C6BF6EF45DA863 <b>Date of Disbursement</b>																				
Mailing Address 155 Brentwood Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Newington State CT Zip Code 06111	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">595.85</td> </tr> </table>	595.85																			
595.85																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

6909.09

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 111 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ryan Silver

Mailing Address 1133 Bennett Way

City State Zip Code  
New Market NH 03857

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** B34E559D0774E4400A9F

Date of Disbursement

/   /

Amount of Each Disbursement this Period

827.87

**B.**

Full Name (Last, First, Middle Initial)

Ryan Silver

Mailing Address 1133 Bennett Way

City State Zip Code  
New Market NH 03857

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** B44FEA097660A406EB45

Date of Disbursement

/   /

Amount of Each Disbursement this Period

197.89

**C.**

Full Name (Last, First, Middle Initial)

Mr. Brandon Smith

Mailing Address 3051 Gertrude Avenue

City State Zip Code  
La Crescenta CA 91214-1910

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** B1A22C4BD4FF745FC9D5

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1102.49

**SUBTOTAL** of Disbursements This Page (optional) .....

2128.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 112 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Mr. Brandon Smith

Mailing Address 3051 Gertrude Avenue

City State Zip Code  
La Crescenta CA 91214-1910

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B9B27F41FA5E540868DB

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2008

Amount of Each Disbursement this Period

607.07

**B.**

Full Name (Last, First, Middle Initial)

Norah Spooner

Mailing Address 5988 South Shore Court

City State Zip Code  
Clear Lake IA 50428-8682

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B6B16E21B9D3847E28FF

Date of Disbursement

MM / DD / YYYY  
01 / 01 / 2008

Amount of Each Disbursement this Period

843.62

**C.**

Full Name (Last, First, Middle Initial)

Norah Spooner

Mailing Address 5988 South Shore Court

City State Zip Code  
Clear Lake IA 50428-8682

Purpose of Disbursement  
Mileage & Office Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B383AC4EC01534C63B5A

Date of Disbursement

MM / DD / YYYY  
01 / 03 / 2008

Amount of Each Disbursement this Period

609.60

**SUBTOTAL** of Disbursements This Page (optional) .....

2060.29

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 113 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Norah Spooner

Mailing Address 5988 South Shore Court

City Clear Lake State IA Zip Code 50428-8682

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BFB2526DBB479451988D

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

805.09

**B.**

Full Name (Last, First, Middle Initial)

Russell Squire

Mailing Address 514 Jefferson Street

City Burlington State IA Zip Code 52601-5426

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B8E83722C9AC446F6BF3

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

771.00

**C.**

Full Name (Last, First, Middle Initial)

Russell Squire

Mailing Address 514 Jefferson Street

City Burlington State IA Zip Code 52601-5426

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B3BD8C4B917364235867

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

457.10

**SUBTOTAL** of Disbursements This Page (optional) .....

2033.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 114 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Scott Stephanou Mailing Address 367 Hanover Street, Apt. 11	<b>Transaction ID:</b> B2FA9193C264D485E8F4 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div>
City Manchester State NH Zip Code 03104-4965 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>1193.92</div> <div>Category/Type</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Scott Stephanou Mailing Address 367 Hanover Street, Apt. 11 City Manchester State NH Zip Code 03104-4965 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> BB53E2DF85B0A434684D <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>427.56</div> <div>Category/Type</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Melanie Stickle Mailing Address 250 North Vernon Avenue City Newark State OH Zip Code 43055-3455 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B120CA823331C427F9DF <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1022.99</div> <div>Category/Type</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2644.47**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 115 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Melanie Stickle	<b>Transaction ID:</b> B06EAE3D373BC476EA72 <b>Date of Disbursement</b>																				
Mailing Address 250 North Vernon Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Newark State OH Zip Code 43055-3455	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">994.74</td> </tr> </table>	994.74																			
994.74																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Kelley Stieh	<b>Transaction ID:</b> B30F211D64EFD411EA97 <b>Date of Disbursement</b>																				
Mailing Address 101 Little Acorn Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Shohola State PA Zip Code 18458-3600	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">806.00</td> </tr> </table>	806.00																			
806.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Kelley Stieh	<b>Transaction ID:</b> B098C6D17F87D413EA3F <b>Date of Disbursement</b>																				
Mailing Address 101 Little Acorn Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Shohola State PA Zip Code 18458-3600	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">187.50</td> </tr> </table>	187.50																			
187.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1988.24

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Ms. Isabelle Stinson-Gerard

Mailing Address P.O. Box 37

City  
Fountaintown

State  
IN

Zip Code  
46130-0037

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B1951A5D5037344B3AED

Date of Disbursement

/   /

Amount of Each Disbursement this Period

972.24

**B.**

Full Name (Last, First, Middle Initial)

Ms. Isabelle Stinson-Gerard

Mailing Address P.O. Box 37

City  
Fountaintown

State  
IN

Zip Code  
46130-0037

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B8A530678CFB54AF49B0

Date of Disbursement

/   /

Amount of Each Disbursement this Period

849.74

**C.**

Full Name (Last, First, Middle Initial)

Dan Story

Mailing Address 162 Corrine Avenue

City  
Council Bluffs

State  
IA

Zip Code  
51503-3603

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B5589BD7E1F5A41A1A0D

Date of Disbursement

/   /

Amount of Each Disbursement this Period

650.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2471.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 117 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Liam Sweeney

Mailing Address 7 Foxcroft Road

City  
West Hartford

State  
CT

Zip Code  
06119-1150

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B49D3B9B00960423F86C

Date of Disbursement

/   /

Amount of Each Disbursement this Period

849.75

**B.**

Full Name (Last, First, Middle Initial)

Liam Sweeney

Mailing Address 7 Foxcroft Road

City  
West Hartford

State  
CT

Zip Code  
06119-1150

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B3E210DF803B44251A55

Date of Disbursement

/   /

Amount of Each Disbursement this Period

350.29

**C.**

Full Name (Last, First, Middle Initial)

Chuck Swirsky

Mailing Address 229 Wooster Street, Apt 229

City  
New Haven

State  
CT

Zip Code  
06511-5711

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B146AE8BB9CE34B37928

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2097.64

**SUBTOTAL** of Disbursements This Page (optional) .....

3297.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 118 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Chuck Swirsky

Mailing Address 229 Wooster Street, Apt 229

City State Zip Code  
New Haven CT 06511-5711

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B3154902E408B4411ACB

Date of Disbursement

/   /

Amount of Each Disbursement this Period

921.90

**B.**

Full Name (Last, First, Middle Initial)

Kate Szostak

Mailing Address 2006 Columbia Road, NW No. 54

City State Zip Code  
Washington DC 20009

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B2B82584D021C460E96F

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1859.16

**C.**

Full Name (Last, First, Middle Initial)

Kate Szostak

Mailing Address 2006 Columbia Road, NW No. 54

City State Zip Code  
Washington DC 20009

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BFB661B5369104275B17

Date of Disbursement

/   /

Amount of Each Disbursement this Period

807.50

**SUBTOTAL** of Disbursements This Page (optional) .....

3588.56

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

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PAGE 119 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Timothy Tagaris	<b>Transaction ID:</b> B53D66F0EBEE2467AA05 <b>Date of Disbursement</b>																				
Mailing Address 297 George Street, Apt. 4F	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City New Haven State CT Zip Code 06511-6622	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">6500.00</td> </tr> </table>	6500.00																			
6500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ariana Toth	<b>Transaction ID:</b> B7243E601AC1B4796AED <b>Date of Disbursement</b>																				
Mailing Address 1800 Watrous Drive, Apt 50 D	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Des Moines State IA Zip Code 50315-3251	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">792.87</td> </tr> </table>	792.87																			
792.87																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ariana Toth	<b>Transaction ID:</b> B3B4A6CAB560547E29D5 <b>Date of Disbursement</b>																				
Mailing Address 1800 Watrous Drive, Apt 50 D	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Des Moines State IA Zip Code 50315-3251	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">582.29</td> </tr> </table>	582.29																			
582.29																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**7875.16**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 120 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Meghan VanDeVenter Mailing Address 5 Riverside Drive	<b>Transaction ID:</b> B7D28C303B5AD41C2BAD <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div>
City Barrington State RI Zip Code 02806-3615 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>965.43</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Meghan VanDeVenter Mailing Address 5 Riverside Drive City Barrington State RI Zip Code 02806-3615 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B0601300F18234593A87 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>244.95</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Jonathan Webster Mailing Address 1229 1st Avenue City Cedar Rapids State IA Zip Code 52402-5007 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> BD920EB9F3DD9403A820 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>820.75</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2031.13**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 121 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Jonathan Webster

Mailing Address 1229 1st Avenue

City

Cedar Rapids

State

IA

Zip Code

52402-5007

Purpose of Disbursement

Salary

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

**Transaction ID:** B1F577C3D758041959F4

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

391.14

**B.**

Full Name (Last, First, Middle Initial)

Matthew Weiner

Mailing Address 2627 13th Street NW

City

Washington

State

DC

Zip Code

20009-5313

Purpose of Disbursement

Salary

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

**Transaction ID:** B40E61158685F4752B2C

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

2230.61

**C.**

Full Name (Last, First, Middle Initial)

Matthew Weiner

Mailing Address 2627 13th Street NW

City

Washington

State

DC

Zip Code

20009-5313

Purpose of Disbursement

Salary

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

**Transaction ID:** B9CB2C75A8DE64149B29

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

1656.85

**SUBTOTAL** of Disbursements This Page (optional) .....

4278.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 122 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Aaron Welch	<b>Transaction ID:</b> B8F49FE434DC54A6B9AE <b>Date of Disbursement</b>																				
Mailing Address 424 Prospect Place #2B	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Brooklyn State NY Zip Code 11238-4121	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1744.31</td> </tr> </table>	1744.31																			
1744.31																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Aaron Welch	<b>Transaction ID:</b> B19BFAE26E69F4F2ABA3 <b>Date of Disbursement</b>																				
Mailing Address 424 Prospect Place #2B	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Brooklyn State NY Zip Code 11238-4121	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">453.82</td> </tr> </table>	453.82																			
453.82																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Eamon Welch	<b>Transaction ID:</b> BAB473689DDB34BA5ADC <b>Date of Disbursement</b>																				
Mailing Address 24 Sunset Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Hilton Head State SC Zip Code 29926-1350	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">924.37</td> </tr> </table>	924.37																			
924.37																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3122.50**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 123 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Eamon Welch	<b>Transaction ID:</b> BC39E0AA700744FE2988 <b>Date of Disbursement</b>																				
Mailing Address 24 Sunset Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	8												
City Hilton Head State SC Zip Code 29926-1350	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">421.88</td> </tr> </table>	421.88																			
421.88																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Byron Wellman	<b>Transaction ID:</b> BC06DEA9139884DAB8F3 <b>Date of Disbursement</b>																				
Mailing Address 2919 Stanton Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Columbia State SC Zip Code 29204-2647	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">153.45</td> </tr> </table>	153.45																			
153.45																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
<b>C.</b> Full Name (Last, First, Middle Initial) Jennifer-Taylor West	<b>Transaction ID:</b> B69D0DE01EE1D4CABB70 <b>Date of Disbursement</b>																				
Mailing Address 1305 Locust Street, Apt 12	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	1		2	0	0	8												
City Des Moines State IA Zip Code 50309-2925	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">2036.45</td> </tr> </table>	2036.45																			
2036.45																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**2611.78**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 124 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Jennifer-Taylor West

Mailing Address 1305 Locust Street, Apt 12

City State Zip Code  
Des Moines IA 50309-2925

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B60D0D458B14045159C9

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

523.20

**B.**

Full Name (Last, First, Middle Initial)

Milledge West

Mailing Address 12 Sunrise Drive

City State Zip Code  
Canton CT 06019-2612

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B180C5422B86B46A582B

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

576.25

**C.**

Full Name (Last, First, Middle Initial)

Richard Wilkins

Mailing Address 1115 Grand Avenue

City State Zip Code  
Des Moines IA 50309-2909

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BFA273118BFA44A608DE

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

1380.74

**SUBTOTAL** of Disbursements This Page (optional) .....

2480.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 125 / 173

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

**A.**

Full Name (Last, First, Middle Initial)

Richard Wilkins

Mailing Address 1115 Grand Avenue

City  
Des Moines

State  
IA

Zip Code  
50309-2909

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B1C16E13AF1DF41A085D

Date of Disbursement

/   /

Amount of Each Disbursement this Period

346.32

**B.**

Full Name (Last, First, Middle Initial)

Ms. Melanie Wong

Mailing Address 1116 Rhode Island Ave

City  
Washington

State  
DC

Zip Code  
20005-4415

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B27B79A66C4B54AAB9F2

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1891.43

**C.**

Full Name (Last, First, Middle Initial)

Ms. Melanie Wong

Mailing Address 1116 Rhode Island Ave

City  
Washington

State  
DC

Zip Code  
20005-4415

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B1454B24AA3094122B7A

Date of Disbursement

/   /

Amount of Each Disbursement this Period

494.02

**SUBTOTAL** of Disbursements This Page (optional) .....

2731.77

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 126 / 173

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

<b>A.</b> Full Name (Last, First, Middle Initial) Philip Yoo	<b>Transaction ID:</b> BE8879C95F1124139BDF <b>Date of Disbursement</b>
Mailing Address 603 Irving Street, NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20010-2905	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary	<div>1334.10</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Philip Yoo	<b>Transaction ID:</b> B9C4ABE119F6541D0A58 <b>Date of Disbursement</b>
Mailing Address 603 Irving Street, NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20010-2905	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary	<div>1631.10</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Ben Young	<b>Transaction ID:</b> B4D1E35416C05432A878 <b>Date of Disbursement</b>
Mailing Address 328 F Street, NE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20002-4931	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Salary	<div>1355.54</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>4320.74</div>
<b>TOTAL</b> This Period (last page this line number only) .....	

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Ben Young

Mailing Address 328 F Street, NE

City  
Washington

State  
DC

Zip Code  
20002-4931

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BDF9A822346D94200A56

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

346.32

B.

Full Name (Last, First, Middle Initial)

Joseph Zepecki

Mailing Address 251 S. Green Valley Pkwy, #2822

City  
Henderson

State  
NV

Zip Code  
89012-2312

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B103C703B04EC47D2890

Date of Disbursement

01 / 01 / 2008

Amount of Each Disbursement this Period

1762.29

C.

Full Name (Last, First, Middle Initial)

Joseph Zepecki

Mailing Address 251 S. Green Valley Pkwy, #2822

City  
Henderson

State  
NV

Zip Code  
89012-2312

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BE3E8CC04337F409887A

Date of Disbursement

01 / 15 / 2008

Amount of Each Disbursement this Period

816.78

SUBTOTAL of Disbursements This Page (optional) .....

2925.39

TOTAL This Period (last page this line number only) .....

486125.95

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 128 / 173

FOR LINE NUMBER:  
(check only one)☐ 19a  
☒ 19bNAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

Transaction ID: C9F661A377D414848B83

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Webster Bank

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 185 Asylum Street

City Hartford State CT ZIP Code 06103-3401

Original Amount of Loan

1302811.25

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1302811.25

**TERMS**

Date Incurred

M M D D Y Y Y Y  
1 2 1 4 2 0 0 7

Date Due

20080430

Interest Rate

6.750 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

1302811.25

**TOTALS** This Period (last page in this line only) ▶

1302811.25

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
COVAD

Nature of Debt (Purpose):  
Internet Services

Mailing Address Dept. 33408  
PO BOX 39000

City State ZIP Code  
San Francisco CA 94139

Outstanding Balance Beginning This Period

0.00

Transaction ID: D5E78BD6138D849C8A7B

Amount Incurred This Period

1535.76

Payment This Period

0.00

Outstanding Balance at Close of This Period

1535.76

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
COVAD

Nature of Debt (Purpose):  
Internet Services

Mailing Address Dept. 33408  
PO BOX 39000

City State ZIP Code  
San Francisco CA 94139

Outstanding Balance Beginning This Period

0.00

Transaction ID: D7FB209F7C488450BA73

Amount Incurred This Period

1056.76

Payment This Period

0.00

Outstanding Balance at Close of This Period

1056.76

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Free Media, Inc.

Nature of Debt (Purpose):  
Reimbursement for Travel  
Expenses

Mailing Address 777 West End Avenue  
#5C

City State ZIP Code  
New York NY 10025

Outstanding Balance Beginning This Period

0.00

Transaction ID: DF03B1B1603F54C5183C

Amount Incurred This Period

635.01

Payment This Period

0.00

Outstanding Balance at Close of This Period

635.01

1) **SUBTOTALS** This Period This Page (optional).....

3227.53

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 130 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ExxonMobilNature of Debt (Purpose):  
Gasoline

Mailing Address P.O. Box 688938

City State ZIP Code  
Des Moines IA 50368-8938

Outstanding Balance Beginning This Period

0.00

Transaction ID: D303F42DD72104352BB3

Amount Incurred This Period

241.86

Payment This Period

0.00

Outstanding Balance at Close of This Period

241.86

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ExxonMobilNature of Debt (Purpose):  
Gasoline

Mailing Address P.O. Box 688938

City State ZIP Code  
Des Moines IA 50368-8938

Outstanding Balance Beginning This Period

0.00

Transaction ID: D2591D51138CC454BA3F

Amount Incurred This Period

429.36

Payment This Period

0.00

Outstanding Balance at Close of This Period

429.36

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TVEyes, Inc.Nature of Debt (Purpose):  
Media Services

Mailing Address 2150 Post Road

City State ZIP Code  
Fairfield CT 06824

Outstanding Balance Beginning This Period

0.00

Transaction ID: D421D5108046A4FA4973

Amount Incurred This Period

500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

**1) SUBTOTALS** This Period This Page (optional).....

1171.22

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 131 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TVEyes, Inc.Nature of Debt (Purpose):  
Media Services

Mailing Address 2150 Post Road

City State ZIP Code  
Fairfield CT 06824

Outstanding Balance Beginning This Period

0.00

Transaction ID: DF1403972FFAD472384D

Amount Incurred This Period

500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
QwestNature of Debt (Purpose):  
TelephoneMailing Address Business Services  
PO Box 91154City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

0.00

Transaction ID: D61C348CBB0624AED874

Amount Incurred This Period

1062.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

1062.75

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
QwestNature of Debt (Purpose):  
TelephoneMailing Address Business Services  
PO Box 91154City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

0.00

Transaction ID: D6224518C358E4E34936

Amount Incurred This Period

669.82

Payment This Period

0.00

Outstanding Balance at Close of This Period

669.82

1) **SUBTOTALS** This Period This Page (optional).....

2232.57

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
QwestNature of Debt (Purpose):  
TelephoneMailing Address Business Services  
PO Box 91154City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

0.00

Transaction ID: DD4C14996C4ED457DBEB

Amount Incurred This Period

474.82

Payment This Period

0.00

Outstanding Balance at Close of This Period

474.82

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
QwestNature of Debt (Purpose):  
TelephoneMailing Address Business Services  
PO Box 91154City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

0.00

Transaction ID: D160BB52601F3469FBFA

Amount Incurred This Period

657.85

Payment This Period

0.00

Outstanding Balance at Close of This Period

657.85

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
QwestNature of Debt (Purpose):  
TelephoneMailing Address Business Services  
PO Box 91154City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

0.00

Transaction ID: DE70EBFB35F4E4F5BBA8

Amount Incurred This Period

471.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

471.50

**1) SUBTOTALS** This Period This Page (optional).....

1604.17

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

0.00

Transaction ID: DC07FD8583E3F4BA58CA

Amount Incurred This Period

58.58

Payment This Period

0.00

Outstanding Balance at Close of This Period

58.58

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

0.00

Transaction ID: DA397374A80A8418D9FD

Amount Incurred This Period

418.15

Payment This Period

0.00

Outstanding Balance at Close of This Period

418.15

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

0.00

Transaction ID: DA3182C7E844C4F039CE

Amount Incurred This Period

575.42

Payment This Period

0.00

Outstanding Balance at Close of This Period

575.42

1) **SUBTOTALS** This Period This Page (optional).....

1052.15

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 134 / 173

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

0.00

Transaction ID: D703363A20B0E44A7A6C

Amount Incurred This Period

431.46

Payment This Period

0.00

Outstanding Balance at Close of This Period

431.46

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

0.00

Transaction ID: DE2EA2BD913EF4C59A0F

Amount Incurred This Period

106.73

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.73

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

0.00

Transaction ID: DF660180FF5C543E886F

Amount Incurred This Period

677.36

Payment This Period

0.00

Outstanding Balance at Close of This Period

677.36

1) **SUBTOTALS** This Period This Page (optional).....

1215.55

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 135 / 173

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Qwest

Nature of Debt (Purpose):  
Telephone

Mailing Address Business Services  
PO Box 91154

City State ZIP Code  
Seattle WA 98111

Outstanding Balance Beginning This Period

0.00

Transaction ID: DA75CCBF704CB4716B86

Amount Incurred This Period

622.51

Payment This Period

0.00

Outstanding Balance at Close of This Period

622.51

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant Energy

Nature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

0.00

Transaction ID: D4DB84BA83BD34248B12

Amount Incurred This Period

540.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

540.80

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant Energy

Nature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

0.00

Transaction ID: D21C371285AF1401F9CB

Amount Incurred This Period

852.59

Payment This Period

0.00

Outstanding Balance at Close of This Period

852.59

1) **SUBTOTALS** This Period This Page (optional).....

2015.90

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 136 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant EnergyNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

0.00

Transaction ID: D637921B16CAA45B19B6

Amount Incurred This Period

254.12

Payment This Period

0.00

Outstanding Balance at Close of This Period

254.12

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant EnergyNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

0.00

Transaction ID: D6F4061A34DE04783A3F

Amount Incurred This Period

877.55

Payment This Period

0.00

Outstanding Balance at Close of This Period

877.55

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant EnergyNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

0.00

Transaction ID: DF36117C0589D4D9C911

Amount Incurred This Period

50.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

50.75

**1) SUBTOTALS** This Period This Page (optional).....

1182.42

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 137 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant EnergyNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

0.00

Transaction ID: D5B3618F71E3745EC9DD

Amount Incurred This Period

401.72

Payment This Period

0.00

Outstanding Balance at Close of This Period

401.72

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant EnergyNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

0.00

Transaction ID: DE6029EBE091B415FB6D

Amount Incurred This Period

239.60

Payment This Period

0.00

Outstanding Balance at Close of This Period

239.60

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alliant EnergyNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3066

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

0.00

Transaction ID: DBA39930B48064589AB5

Amount Incurred This Period

263.55

Payment This Period

0.00

Outstanding Balance at Close of This Period

263.55

**1) SUBTOTALS** This Period This Page (optional).....

904.87

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 138 / 173

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Allied Telecom

Nature of Debt (Purpose):  
Internet Services

Mailing Address PO BOX 758792

City State ZIP Code  
Baltimore MD 21275

Outstanding Balance Beginning This Period

0.00

Transaction ID: DEA9D9C89FC7F444DAD8

Amount Incurred This Period

850.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

850.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verham News Corp.

Nature of Debt (Purpose):  
Rent

Mailing Address P.O. Box 706

City State ZIP Code  
White River Jct VT 05001-0706

Outstanding Balance Beginning This Period

0.00

Transaction ID: DE2E3D979014F4B2194A

Amount Incurred This Period

910.28

Payment This Period

0.00

Outstanding Balance at Close of This Period

910.28

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Comcast

Nature of Debt (Purpose):  
Cable & Internet

Mailing Address PO Box 1577

City State ZIP Code  
Newark NJ 07101

Outstanding Balance Beginning This Period

0.00

Transaction ID: D3A3A16E658A34B44B21

Amount Incurred This Period

351.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

351.30

1) **SUBTOTALS** This Period This Page (optional).....

2111.58

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 139 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ComcastNature of Debt (Purpose):  
Cable Service

Mailing Address PO Box 1577

City State ZIP Code  
Newark NJ 07101

Outstanding Balance Beginning This Period

0.00

Transaction ID: D054E2AB68F284AAA9A7

Amount Incurred This Period

513.74

Payment This Period

0.00

Outstanding Balance at Close of This Period

513.74

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Public Service of New HampshireNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 360

City State ZIP Code  
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

0.00

Transaction ID: DD1D454DB157C4318B67

Amount Incurred This Period

376.44

Payment This Period

0.00

Outstanding Balance at Close of This Period

376.44

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Public Service of New HampshireNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 360

City State ZIP Code  
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

0.00

Transaction ID: DE82D6F912C4D47CB9A5

Amount Incurred This Period

246.08

Payment This Period

0.00

Outstanding Balance at Close of This Period

246.08

**1) SUBTOTALS** This Period This Page (optional).....

1136.26

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 140 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Public Service of New HampshireNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 360

City State ZIP Code  
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

0.00

Transaction ID: D5B30D2CCB1A941208DC

Amount Incurred This Period

993.78

Payment This Period

0.00

Outstanding Balance at Close of This Period

993.78

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Public Service of New HampshireNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 360

City State ZIP Code  
Manchester NH 03105-0360

Outstanding Balance Beginning This Period

0.00

Transaction ID: D5B0C3B4DA75E4096B6A

Amount Incurred This Period

131.82

Payment This Period

0.00

Outstanding Balance at Close of This Period

131.82

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Operations UnLimited, Inc.Nature of Debt (Purpose):  
Office Operations Consult-  
ing

Mailing Address 113 Hilands Place

City State ZIP Code  
Pittsburgh PA 15237

Outstanding Balance Beginning This Period

0.00

Transaction ID: D0126046A41F34134AE6

Amount Incurred This Period

2648.11

Payment This Period

0.00

Outstanding Balance at Close of This Period

2648.11

**1) SUBTOTALS** This Period This Page (optional).....

3773.71

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Pentimento Design LLC

Nature of Debt (Purpose):  
Reindeer decorations

Mailing Address 1133 Mapleton Avenue

City State ZIP Code  
Suffield CT 06078

Outstanding Balance Beginning This Period

0.00

Transaction ID: DF4C1AA581F164ADAB6A

Amount Incurred This Period

212.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

212.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mason City Public Utilities

Nature of Debt (Purpose):  
Utilities

Mailing Address 10 First Street Northwest

City State ZIP Code  
Mason City IA 50401-3224

Outstanding Balance Beginning This Period

0.00

Transaction ID: DDE7D15C566704EE4997

Amount Incurred This Period

123.36

Payment This Period

0.00

Outstanding Balance at Close of This Period

123.36

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Comcast

Nature of Debt (Purpose):  
Cable

Mailing Address P.O. Box 3005

City State ZIP Code  
Southeastern PA 19398-3005

Outstanding Balance Beginning This Period

0.00

Transaction ID: DE4073F91E26A41B19CB

Amount Incurred This Period

130.78

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.78

1) **SUBTOTALS** This Period This Page (optional).....

466.14

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 142 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ComcastNature of Debt (Purpose):  
Cable Service

Mailing Address P.O. Box 3005

City State ZIP Code  
Southeastern PA 19398-3005

Outstanding Balance Beginning This Period

0.00

Transaction ID: D1327435AF7974016BBD

Amount Incurred This Period

197.56

Payment This Period

0.00

Outstanding Balance at Close of This Period

197.56

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ComcastNature of Debt (Purpose):  
Cable

Mailing Address P.O. Box 3005

City State ZIP Code  
Southeastern PA 19398-3005

Outstanding Balance Beginning This Period

0.00

Transaction ID: D77C21BCA099B4529A8B

Amount Incurred This Period

130.78

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.78

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Telephone

Mailing Address PO Box 660720

City State ZIP Code  
Dallas TX 75266

Outstanding Balance Beginning This Period

0.00

Transaction ID: DF9E84213BC0C4FA4959

Amount Incurred This Period

22.28

Payment This Period

0.00

Outstanding Balance at Close of This Period

22.28

**1) SUBTOTALS** This Period This Page (optional).....

350.62

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 143 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Reimbursement for Gas/Pay-  
ment for signat

Mailing Address PO Box 660720

City State ZIP Code  
Dallas TX 75266

Outstanding Balance Beginning This Period

0.00

Transaction ID: D1F3CD639871A479893D

Amount Incurred This Period

107.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Telephone

Mailing Address PO Box 660720

City State ZIP Code  
Dallas TX 75266

Outstanding Balance Beginning This Period

0.00

Transaction ID: D0A801840ADAA424FBF4

Amount Incurred This Period

6277.73

Payment This Period

0.00

Outstanding Balance at Close of This Period

6277.73

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VFW Post 775Nature of Debt (Purpose):  
Space Rental

Mailing Address 702 West Main Street

City State ZIP Code  
Ottumwa IA 52501-2226

Outstanding Balance Beginning This Period

0.00

Transaction ID: D9F4487EF4F6F4DB6923

Amount Incurred This Period

150.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150.00

**1) SUBTOTALS** This Period This Page (optional).....

6534.73

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 144 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

0.00

Transaction ID: DC05308729895455AAF0

Amount Incurred This Period

647.11

Payment This Period

0.00

Outstanding Balance at Close of This Period

647.11

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

0.00

Transaction ID: D03866EA927C6487BAA8

Amount Incurred This Period

896.07

Payment This Period

0.00

Outstanding Balance at Close of This Period

896.07

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

0.00

Transaction ID: D7AA2635D35294D99959

Amount Incurred This Period

694.96

Payment This Period

0.00

Outstanding Balance at Close of This Period

694.96

**1) SUBTOTALS** This Period This Page (optional).....

2238.14

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verizon

Nature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

0.00

Transaction ID: DAC79A50A402441AB9DA

Amount Incurred This Period

983.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

983.75

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verizon

Nature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

0.00

Transaction ID: DAB48C0D1D9BF48E2819

Amount Incurred This Period

320.68

Payment This Period

0.00

Outstanding Balance at Close of This Period

320.68

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verizon

Nature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code  
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

0.00

Transaction ID: D684E05F5028F4B9FA8C

Amount Incurred This Period

1646.22

Payment This Period

0.00

Outstanding Balance at Close of This Period

1646.22

1) **SUBTOTALS** This Period This Page (optional).....

2950.65

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 146 / 173

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Des Moines Theatrical Shop

Nature of Debt (Purpose):  
Costume Rental

Mailing Address 145 5th Street

City State ZIP Code  
West Des Moines IA 50265

Outstanding Balance Beginning This Period

0.00

Transaction ID: D7952AAF64B9C4F0997B

Amount Incurred This Period

106.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Des Moines Water Works

Nature of Debt (Purpose):  
Utilities

Mailing Address 2201 George Flagg Parkway

City State ZIP Code  
Des Moines IA 50321-1190

Outstanding Balance Beginning This Period

0.00

Transaction ID: D1475748209CF4A0092F

Amount Incurred This Period

117.91

Payment This Period

0.00

Outstanding Balance at Close of This Period

117.91

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Unitil

Nature of Debt (Purpose):  
Utilities

Mailing Address PO BOX 2013

City State ZIP Code  
Concord NH 03302

Outstanding Balance Beginning This Period

0.00

Transaction ID: DA152B4E040B54711AC1

Amount Incurred This Period

115.06

Payment This Period

0.00

Outstanding Balance at Close of This Period

115.06

1) **SUBTOTALS** This Period This Page (optional).....

338.97

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 147 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
UnitilNature of Debt (Purpose):  
Rent

Mailing Address PO BOX 2013

City State ZIP Code  
Concord NH 03302

Outstanding Balance Beginning This Period

0.00

Transaction ID: DC8799FFAC5FD40A884A

Amount Incurred This Period

910.28

Payment This Period

0.00

Outstanding Balance at Close of This Period

910.28

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
REMAX Results RealtyNature of Debt (Purpose):  
Rent and Utilities

Mailing Address 202 1st NW

City State ZIP Code  
Mason City IA 50401

Outstanding Balance Beginning This Period

0.00

Transaction ID: D14F42980C9EF465D8A0

Amount Incurred This Period

1036.46

Payment This Period

0.00

Outstanding Balance at Close of This Period

1036.46

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Jocelyn Augustino PhotogrpaherNature of Debt (Purpose):  
Photographer

Mailing Address 3416 Gunston Road

City State ZIP Code  
Alexandria VA 22302-2134

Outstanding Balance Beginning This Period

0.00

Transaction ID: D0781506CE4AC48A0805

Amount Incurred This Period

69.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

69.00

**1) SUBTOTALS** This Period This Page (optional).....

2015.74

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 148 / 173

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Drink More Water

Nature of Debt (Purpose):  
Water Delivery

Mailing Address Montgomery County Airpark  
7595-A Rickenbacker Drive

City State ZIP Code  
Gaithersburg MD 20879

Outstanding Balance Beginning This Period

0.00

Transaction ID: DCDE895EA2CFC4A338ED

Amount Incurred This Period

32.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

32.50

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
NexGen

Nature of Debt (Purpose):  
Utilities

Mailing Address 10500 Hickman Road Ste J

City State ZIP Code  
Clive IA 50325-3706

Outstanding Balance Beginning This Period

0.00

Transaction ID: D2FBA9339003447ADB22

Amount Incurred This Period

224.86

Payment This Period

0.00

Outstanding Balance at Close of This Period

224.86

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mediacom

Nature of Debt (Purpose):  
Cable

Mailing Address P.O. Box 5744

City State ZIP Code  
Carol Stream IL 60197-5744

Outstanding Balance Beginning This Period

0.00

Transaction ID: D34D4235A01F441BAA58

Amount Incurred This Period

230.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

230.00

1) **SUBTOTALS** This Period This Page (optional).....

487.36

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 149 / 173

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WHO Newsradio 1040

Nature of Debt (Purpose):  
Recording Services

Mailing Address 2141 Grand Avenue

City State ZIP Code  
Des Moines IA 50312

Outstanding Balance Beginning This Period

0.00

Transaction ID: D5CA66406DA5143F7848

Amount Incurred This Period

400.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Storefront Political Media

Nature of Debt (Purpose):  
Photographer

Mailing Address 250 Sutter Street, Suite 650

City State ZIP Code  
San Francisco CA 94108

Outstanding Balance Beginning This Period

0.00

Transaction ID: DDB39DC1EDB03445B8B5

Amount Incurred This Period

537.08

Payment This Period

0.00

Outstanding Balance at Close of This Period

537.08

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Bi-State Cartridge Service, Inc.

Nature of Debt (Purpose):  
Office Supplies

Mailing Address 1325 15th Street

City State ZIP Code  
Moline IL 61265

Outstanding Balance Beginning This Period

0.00

Transaction ID: D163D453900874450889

Amount Incurred This Period

130.54

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.54

1) **SUBTOTALS** This Period This Page (optional).....

1067.62

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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for each  
numbered line)

PAGE 150 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Direct TVNature of Debt (Purpose):  
Cable Service

Mailing Address PO Box 60036

City State ZIP Code  
Los Angeles CA 90060

Outstanding Balance Beginning This Period

0.00

Transaction ID: D8A78FBAECFAE431F9D3

Amount Incurred This Period

166.33

Payment This Period

0.00

Outstanding Balance at Close of This Period

166.33

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Direct TV

Nature of Debt (Purpose):

Mailing Address PO Box 60036

City State ZIP Code  
Los Angeles CA 90060

Outstanding Balance Beginning This Period

0.00

Transaction ID: D85A3B16436524DB49E1

Amount Incurred This Period

6000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Direct TVNature of Debt (Purpose):  
Cable Service

Mailing Address PO Box 60036

City State ZIP Code  
Los Angeles CA 90060

Outstanding Balance Beginning This Period

0.00

Transaction ID: DBC6FF85AE35C41E68CA

Amount Incurred This Period

44.26

Payment This Period

0.00

Outstanding Balance at Close of This Period

44.26

**1) SUBTOTALS** This Period This Page (optional).....

6210.59

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 151 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Direct TVNature of Debt (Purpose):  
Cable Service

Mailing Address PO Box 60036

City State ZIP Code  
Los Angeles CA 90060

Outstanding Balance Beginning This Period

0.00

Transaction ID: D98583EF190B742F4B0A

Amount Incurred This Period

32.22

Payment This Period

0.00

Outstanding Balance at Close of This Period

32.22

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Air Charter Team, Inc.Nature of Debt (Purpose):  
TransportationMailing Address 10015 N.W. Ambassadors Drive  
Suite 202City State ZIP Code  
Kansas City MO 64153

Outstanding Balance Beginning This Period

0.00

Transaction ID: DCAA2DBC5CEA94CD089C

Amount Incurred This Period

1304.61

Payment This Period

0.00

Outstanding Balance at Close of This Period

1304.61

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Zahara's Cafe & Bakery, Inc.Nature of Debt (Purpose):  
Food & Beverage

Mailing Address 525 Washington Blvd, 2nd Flr

City State ZIP Code  
Jersey City NJ 07310

Outstanding Balance Beginning This Period

0.00

Transaction ID: DD281F4AE8DC34BC7B93

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

**1) SUBTOTALS** This Period This Page (optional).....

3836.83

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Charles George Trucking Co., Inc.

Nature of Debt (Purpose):  
Utilities

Mailing Address PO Box 857

City State ZIP Code  
Londonberry NH 03053

Outstanding Balance Beginning This Period

0.00

Transaction ID: D6710E52FE45143BEBAF

Amount Incurred This Period

535.52

Payment This Period

0.00

Outstanding Balance at Close of This Period

535.52

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Embarq

Nature of Debt (Purpose):  
Telephone

Mailing Address PO Box 660068

City State ZIP Code  
Dallas TX 75266

Outstanding Balance Beginning This Period

0.00

Transaction ID: DBF0B293CD60A40ED8E0

Amount Incurred This Period

1064.16

Payment This Period

0.00

Outstanding Balance at Close of This Period

1064.16

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Embarq

Nature of Debt (Purpose):  
Telephone

Mailing Address PO Box 660068

City State ZIP Code  
Dallas TX 75266

Outstanding Balance Beginning This Period

0.00

Transaction ID: DF4A4422265684FB29B9

Amount Incurred This Period

378.82

Payment This Period

0.00

Outstanding Balance at Close of This Period

378.82

1) **SUBTOTALS** This Period This Page (optional).....

1978.50

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AT&TNature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code  
Aurora IL 60572

Outstanding Balance Beginning This Period

0.00

Transaction ID: DD45DB76A7149485EADE

Amount Incurred This Period

259.14

Payment This Period

0.00

Outstanding Balance at Close of This Period

259.14

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AT&TNature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code  
Aurora IL 60572

Outstanding Balance Beginning This Period

0.00

Transaction ID: DFE38B3A3574543178FC

Amount Incurred This Period

1715.68

Payment This Period

0.00

Outstanding Balance at Close of This Period

1715.68

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AT&TNature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code  
Aurora IL 60572

Outstanding Balance Beginning This Period

0.00

Transaction ID: D4D41F6E8290A40B7B1F

Amount Incurred This Period

623.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

623.00

**1) SUBTOTALS** This Period This Page (optional).....

2597.82

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 154 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AT&TNature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code  
Aurora IL 60572

Outstanding Balance Beginning This Period

0.00

Transaction ID: D561E5E0579E7422A8F4

Amount Incurred This Period

1055.11

Payment This Period

0.00

Outstanding Balance at Close of This Period

1055.11

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Waste ManagementNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 756

City State ZIP Code  
Des Moines IA 50303

Outstanding Balance Beginning This Period

0.00

Transaction ID: D26D95FA926E146209F5

Amount Incurred This Period

149.94

Payment This Period

0.00

Outstanding Balance at Close of This Period

149.94

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Perkins CoieNature of Debt (Purpose):  
Legal ServicesMailing Address Centralized Accounting Dept.  
1201 Third Ave., 40th FloorCity State ZIP Code  
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

0.00

Transaction ID: D2550339EB07C40E994D

Amount Incurred This Period

25037.09

Payment This Period

0.00

Outstanding Balance at Close of This Period

25037.09

**1) SUBTOTALS** This Period This Page (optional).....

26242.14

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Perkins CoieNature of Debt (Purpose):  
Legal ServicesMailing Address Centralized Accounting Dept.  
1201 Third Ave., 40th FloorCity State ZIP Code  
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

0.00

Transaction ID: D2900156C49674E41A2B

Amount Incurred This Period

25134.72

Payment This Period

0.00

Outstanding Balance at Close of This Period

25134.72

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Perkins CoieNature of Debt (Purpose):  
Legal ServicesMailing Address Centralized Accounting Dept.  
1201 Third Ave., 40th FloorCity State ZIP Code  
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

0.00

Transaction ID: DDAAD6917DA7140B1B6D

Amount Incurred This Period

25233.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25233.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Hinckley SpringsNature of Debt (Purpose):  
Water Cooler Services

Mailing Address P.O. Box 660579

City State ZIP Code  
Dallas TX 75266-0579

Outstanding Balance Beginning This Period

0.00

Transaction ID: DFD07531348F8439BA68

Amount Incurred This Period

296.68

Payment This Period

0.00

Outstanding Balance at Close of This Period

296.68

**1) SUBTOTALS** This Period This Page (optional).....

50664.40

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Universal Printing Company LLC

Nature of Debt (Purpose):  
Printing

Mailing Address 1101 Penn Avenue

City State ZIP Code  
Scranton PA 18509

Outstanding Balance Beginning This Period

0.00

Transaction ID: DC5C4695FC2C6478F875

Amount Incurred This Period

485.08

Payment This Period

0.00

Outstanding Balance at Close of This Period

485.08

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Freeman

Nature of Debt (Purpose):  
Event Rental

Mailing Address P.O. Box 650036

City State ZIP Code  
Dallas TX 75265-0036

Outstanding Balance Beginning This Period

0.00

Transaction ID: D762D234592FA4797973

Amount Incurred This Period

2774.87

Payment This Period

0.00

Outstanding Balance at Close of This Period

2774.87

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
The Immediacy Group

Nature of Debt (Purpose):  
Television

Mailing Address 1800 S Street

City State ZIP Code  
Washington DC 20009

Outstanding Balance Beginning This Period

0.00

Transaction ID: DE079EBE7C9854073A8E

Amount Incurred This Period

50000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50000.00

1) **SUBTOTALS** This Period This Page (optional).....

53259.95

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Newman and Leventhal Caterers, Inc.Nature of Debt (Purpose):  
Caterer

Mailing Address 45 West 81st Street

City State ZIP Code  
New York NY 10024-6025

Outstanding Balance Beginning This Period

0.00

Transaction ID: D2FDEA7A6FB3F461FA7F

Amount Incurred This Period

2136.07

Payment This Period

0.00

Outstanding Balance at Close of This Period

2136.07

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Carter PrintingNature of Debt (Purpose):  
Printing

Mailing Address 1739 East Grand Avenue

City State ZIP Code  
Des Moines IA 50316

Outstanding Balance Beginning This Period

0.00

Transaction ID: D3239DDE2C2B14D02B40

Amount Incurred This Period

7233.31

Payment This Period

0.00

Outstanding Balance at Close of This Period

7233.31

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
The Dubuque LeaderNature of Debt (Purpose):  
Printing

Mailing Address 1527 Central Avenue

City State ZIP Code  
Dubuque IA 52004

Outstanding Balance Beginning This Period

0.00

Transaction ID: D308E0032B374413E8A3

Amount Incurred This Period

360.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

360.50

**1) SUBTOTALS** This Period This Page (optional).....

9729.88

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Koch Brothers

Nature of Debt (Purpose):  
Copier

Mailing Address 325 Grand Avenue  
P.O. Box 1755

City State ZIP Code  
Des Moines IA 50306

Outstanding Balance Beginning This Period

0.00

Transaction ID: D507C0CAE097148828FA

Amount Incurred This Period

211.99

Payment This Period

0.00

Outstanding Balance at Close of This Period

211.99

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Koch Brothers

Nature of Debt (Purpose):  
Copier

Mailing Address 325 Grand Avenue  
P.O. Box 1755

City State ZIP Code  
Des Moines IA 50306

Outstanding Balance Beginning This Period

0.00

Transaction ID: DFAE4308D10124EEDAE3

Amount Incurred This Period

126.82

Payment This Period

0.00

Outstanding Balance at Close of This Period

126.82

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Koch Brothers

Nature of Debt (Purpose):  
Copier

Mailing Address 325 Grand Avenue  
P.O. Box 1755

City State ZIP Code  
Des Moines IA 50306

Outstanding Balance Beginning This Period

0.00

Transaction ID: D49C4F11B6E044AA5A29

Amount Incurred This Period

318.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

318.00

1) **SUBTOTALS** This Period This Page (optional).....

656.81

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Koch BrothersNature of Debt (Purpose):  
CopierMailing Address 325 Grand Avenue  
P.O. Box 1755City State ZIP Code  
Des Moines IA 50306

Outstanding Balance Beginning This Period

0.00

Transaction ID: D3176BA92E7384BCA0A

Amount Incurred This Period

318.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

318.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Koch BrothersNature of Debt (Purpose):  
CopierMailing Address 325 Grand Avenue  
P.O. Box 1755City State ZIP Code  
Des Moines IA 50306

Outstanding Balance Beginning This Period

0.00

Transaction ID: D3C51D93654FD40B59BB

Amount Incurred This Period

211.99

Payment This Period

0.00

Outstanding Balance at Close of This Period

211.99

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code  
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

0.00

Transaction ID: D40B8D89E3ABE4545B3C

Amount Incurred This Period

140.70

Payment This Period

0.00

Outstanding Balance at Close of This Period

140.70

**1) SUBTOTALS** This Period This Page (optional).....

670.69

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 160 / 173

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verizon

Nature of Debt (Purpose):  
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City	State	ZIP Code
Irvine	CA	92618-4201

Outstanding Balance Beginning This Period

0.00

Transaction ID: DC3EE07A89ADF414596B

Amount Incurred This Period

324.97

Payment This Period

0.00

Outstanding Balance at Close of This Period

324.97

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verizon

Nature of Debt (Purpose):  
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City	State	ZIP Code
Irvine	CA	92618-4201

Outstanding Balance Beginning This Period

0.00

Transaction ID: D7AA61021F4A546ABB58

Amount Incurred This Period

625.92

Payment This Period

0.00

Outstanding Balance at Close of This Period

625.92

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verizon

Nature of Debt (Purpose):  
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City	State	ZIP Code
Irvine	CA	92618-4201

Outstanding Balance Beginning This Period

0.00

Transaction ID: D59D402EB48494DF2B2C

Amount Incurred This Period

285.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

285.25

1) **SUBTOTALS** This Period This Page (optional).....

1236.14

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code  
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

0.00

Transaction ID: DB59E8AD1B4CC46098EF

Amount Incurred This Period

281.01

Payment This Period

0.00

Outstanding Balance at Close of This Period

281.01

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code  
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

0.00

Transaction ID: DA1C685B9BF4F4CD7A76

Amount Incurred This Period

561.93

Payment This Period

0.00

Outstanding Balance at Close of This Period

561.93

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code  
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

0.00

Transaction ID: D0F58D7FEFA5B4E43939

Amount Incurred This Period

680.73

Payment This Period

0.00

Outstanding Balance at Close of This Period

680.73

**1) SUBTOTALS** This Period This Page (optional).....

1523.67

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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for each  
numbered line)

PAGE 162 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ABC-Electrical ContractorsNature of Debt (Purpose):  
Phone WorkMailing Address 10520 Hickman Road  
Suite ABCCity State ZIP Code  
Des Moines IA 50325

Outstanding Balance Beginning This Period

0.00

Transaction ID: DADFAFC251E1148F6B40

Amount Incurred This Period

1866.01

Payment This Period

0.00

Outstanding Balance at Close of This Period

1866.01

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Simard PrintingNature of Debt (Purpose):  
Printing Services

Mailing Address 300 Salem Street

City State ZIP Code  
Woburn MA 01801-2055

Outstanding Balance Beginning This Period

0.00

Transaction ID: DAEB900B19D5343069F1

Amount Incurred This Period

433.13

Payment This Period

0.00

Outstanding Balance at Close of This Period

433.13

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Old Town Family RestaurantNature of Debt (Purpose):  
Food & Beverage

Mailing Address 2107 Camanche Avenue

City State ZIP Code  
Clinton IA 52732-6036

Outstanding Balance Beginning This Period

0.00

Transaction ID: D8B59DA12044449C0AE9

Amount Incurred This Period

130.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.00

**1) SUBTOTALS** This Period This Page (optional).....

2429.14

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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for each  
numbered line)

PAGE 163 / 173

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MoreSound CompanyNature of Debt (Purpose):  
Sound Equipment

Mailing Address 102 North Street

City State ZIP Code  
Jaffrey NH 03452-5301

Outstanding Balance Beginning This Period

0.00

Transaction ID: D4310E2A2AC3D49AFB1C

Amount Incurred This Period

400.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Washington Promotions & PrintingNature of Debt (Purpose):  
PrintingMailing Address 5125 MacArthur Blvd. NW  
Suite 14City State ZIP Code  
Washington DC 20016

Outstanding Balance Beginning This Period

0.00

Transaction ID: DE815690D20EF4A6EB02

Amount Incurred This Period

5547.90

Payment This Period

0.00

Outstanding Balance at Close of This Period

5547.90

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
UPSNature of Debt (Purpose):  
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code  
Philadelphia PA 19170

Outstanding Balance Beginning This Period

0.00

Transaction ID: D93A99FFBC04A4242996

Amount Incurred This Period

434.09

Payment This Period

0.00

Outstanding Balance at Close of This Period

434.09

**1) SUBTOTALS** This Period This Page (optional).....

6381.99

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
UPSNature of Debt (Purpose):  
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code  
Philadelphia PA 19170

Outstanding Balance Beginning This Period

0.00

Transaction ID: D6EB2D896D8C64BA8AA9

Amount Incurred This Period

60.76

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.76

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
UPSNature of Debt (Purpose):  
Shipping

Mailing Address PO Box 7247-0244

City State ZIP Code  
Philadelphia PA 19170

Outstanding Balance Beginning This Period

0.00

Transaction ID: DC7364FE5C9E54CCCA73

Amount Incurred This Period

427.18

Payment This Period

0.00

Outstanding Balance at Close of This Period

427.18

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
UPSNature of Debt (Purpose):  
Shippng

Mailing Address PO Box 7247-0244

City State ZIP Code  
Philadelphia PA 19170

Outstanding Balance Beginning This Period

0.00

Transaction ID: D46BD2137637F4679A43

Amount Incurred This Period

126.91

Payment This Period

0.00

Outstanding Balance at Close of This Period

126.91

**1) SUBTOTALS** This Period This Page (optional).....

614.85

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Cedar Rapids Municipal UtilitiesNature of Debt (Purpose):  
Utilities

Mailing Address PO Box 3255

City State ZIP Code  
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

0.00

Transaction ID: D9457B91CEE0540E8A08

Amount Incurred This Period

165.81

Payment This Period

0.00

Outstanding Balance at Close of This Period

165.81

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Kilkenney'sNature of Debt (Purpose):  
Food & Beverage

Mailing Address 300 West 3rd Street

City State ZIP Code  
Davenport IA 52801-1208

Outstanding Balance Beginning This Period

0.00

Transaction ID: DE9F171102B294984BCD

Amount Incurred This Period

220.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

220.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Cox CommunicationsNature of Debt (Purpose):  
Internet Services

Mailing Address PO Box 6059

City State ZIP Code  
Cypress CA 90630

Outstanding Balance Beginning This Period

0.00

Transaction ID: DEAECEB41D358C496EAE8

Amount Incurred This Period

138.02

Payment This Period

0.00

Outstanding Balance at Close of This Period

138.02

**1) SUBTOTALS** This Period This Page (optional).....

523.83

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Frontline Productions

Nature of Debt (Purpose):  
Lighting & Video

Mailing Address 125 Hemlock Drive

City State ZIP Code  
Deep River CT 06417

Outstanding Balance Beginning This Period

0.00

Transaction ID: DF269F8B8076845BAB94

Amount Incurred This Period

885.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

885.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Heartland Flagpoles and Flags

Nature of Debt (Purpose):  
Flags

Mailing Address 3719 SW 9th Street

City State ZIP Code  
Des Moines IA 50315

Outstanding Balance Beginning This Period

0.00

Transaction ID: D42D026888D4F47D198F

Amount Incurred This Period

436.60

Payment This Period

0.00

Outstanding Balance at Close of This Period

436.60

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Geoff Luxenberg

Nature of Debt (Purpose):  
Reimbursement for Gas/Pay-  
ment for signat

Mailing Address 249A New State Road

City State ZIP Code  
Manchester CT 06042-7959

Outstanding Balance Beginning This Period

0.00

Transaction ID: D3BEB98490D8F4B87A07

Amount Incurred This Period

107.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.00

1) **SUBTOTALS** This Period This Page (optional).....

1428.60

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
U.S. Express Inc.Nature of Debt (Purpose):  
Courier Services

Mailing Address 3240 Hubbard Road

City State ZIP Code  
Landover MD 20785

Outstanding Balance Beginning This Period

0.00

Transaction ID: D80871DA60A7642ADAA1

Amount Incurred This Period

160.24

Payment This Period

0.00

Outstanding Balance at Close of This Period

160.24

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Metropolitan ClubNature of Debt (Purpose):  
Food & Beverage

Mailing Address One East 60th Street

City State ZIP Code  
New York NY 10022

Outstanding Balance Beginning This Period

0.00

Transaction ID: D633B2D0BC9E641C0B52

Amount Incurred This Period

21459.11

Payment This Period

0.00

Outstanding Balance at Close of This Period

21459.11

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KeyspanNature of Debt (Purpose):  
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code  
Waltham MA 02451

Outstanding Balance Beginning This Period

0.00

Transaction ID: D0F2F1D778B8B4FC99B6

Amount Incurred This Period

755.64

Payment This Period

0.00

Outstanding Balance at Close of This Period

755.64

**1) SUBTOTALS** This Period This Page (optional).....

22374.99

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KeyspanNature of Debt (Purpose):  
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code  
Waltham MA 02451

Outstanding Balance Beginning This Period

0.00

Transaction ID: D9A45BD2CD468457093F

Amount Incurred This Period

2919.27

Payment This Period

0.00

Outstanding Balance at Close of This Period

2919.27

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KeyspanNature of Debt (Purpose):  
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code  
Waltham MA 02451

Outstanding Balance Beginning This Period

0.00

Transaction ID: D7B85A230D64E4671B06

Amount Incurred This Period

38.96

Payment This Period

0.00

Outstanding Balance at Close of This Period

38.96

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KeyspanNature of Debt (Purpose):  
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code  
Waltham MA 02451

Outstanding Balance Beginning This Period

0.00

Transaction ID: DB9074E8EDA3B4C25ABE

Amount Incurred This Period

164.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

164.80

**1) SUBTOTALS** This Period This Page (optional).....

3123.03

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KeyspanNature of Debt (Purpose):  
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code  
Waltham MA 02451

Outstanding Balance Beginning This Period

0.00

Transaction ID: DD0258CA80C884AB6960

Amount Incurred This Period

239.04

Payment This Period

0.00

Outstanding Balance at Close of This Period

239.04

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KeyspanNature of Debt (Purpose):  
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code  
Waltham MA 02451

Outstanding Balance Beginning This Period

0.00

Transaction ID: DBDF3A2CB333C4D6484D

Amount Incurred This Period

118.88

Payment This Period

0.00

Outstanding Balance at Close of This Period

118.88

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KeyspanNature of Debt (Purpose):  
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code  
Waltham MA 02451

Outstanding Balance Beginning This Period

0.00

Transaction ID: D74946712598A4C599FE

Amount Incurred This Period

298.81

Payment This Period

0.00

Outstanding Balance at Close of This Period

298.81

**1) SUBTOTALS** This Period This Page (optional).....

656.73

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Keyspan

Nature of Debt (Purpose):  
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code  
Waltham MA 02451

Outstanding Balance Beginning This Period

0.00

Transaction ID: DDFA00C779CF445C8AA6

Amount Incurred This Period

1481.16

Payment This Period

0.00

Outstanding Balance at Close of This Period

1481.16

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
The Printer Works

Nature of Debt (Purpose):  
Printer

Mailing Address 3481 Arden Road

City State ZIP Code  
Hayward CA 94545

Outstanding Balance Beginning This Period

0.00

Transaction ID: DFC2998A4374B4E86BCA

Amount Incurred This Period

819.44

Payment This Period

0.00

Outstanding Balance at Close of This Period

819.44

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican Energy

Nature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

0.00

Transaction ID: D91E4CB1724CB455C94A

Amount Incurred This Period

416.01

Payment This Period

0.00

Outstanding Balance at Close of This Period

416.01

1) **SUBTOTALS** This Period This Page (optional).....

2716.61

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican EnergyNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

0.00

Transaction ID: DEC21CC9229D5404F97B

Amount Incurred This Period

1115.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

1115.75

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican EnergyNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

0.00

Transaction ID: DFC448EB6B1054323A65

Amount Incurred This Period

659.58

Payment This Period

0.00

Outstanding Balance at Close of This Period

659.58

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican EnergyNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

0.00

Transaction ID: D275E706E6F7F4C6C938

Amount Incurred This Period

72.04

Payment This Period

0.00

Outstanding Balance at Close of This Period

72.04

1) **SUBTOTALS** This Period This Page (optional).....

1847.37

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican EnergyNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

0.00

Transaction ID: DF30D747F375F47E5882

Amount Incurred This Period

123.36

Payment This Period

0.00

Outstanding Balance at Close of This Period

123.36

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican EnergyNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

0.00

Transaction ID: DAB442CA849544E83A13

Amount Incurred This Period

196.90

Payment This Period

0.00

Outstanding Balance at Close of This Period

196.90

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican EnergyNature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

0.00

Transaction ID: DB92957A464EF4AC685D

Amount Incurred This Period

1406.57

Payment This Period

0.00

Outstanding Balance at Close of This Period

1406.57

**1) SUBTOTALS** This Period This Page (optional).....

1726.83

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
Chris Dodd For President Inc

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican Energy

Nature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

0.00

Transaction ID: D7B3E6DAFE5CE4AFB9B8

Amount Incurred This Period

65.24

Payment This Period

0.00

Outstanding Balance at Close of This Period

65.24

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MidAmerican Energy

Nature of Debt (Purpose):  
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code  
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

0.00

Transaction ID: D2F929A7374FC4A50B84

Amount Incurred This Period

78.77

Payment This Period

0.00

Outstanding Balance at Close of This Period

78.77

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AT&T

Nature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code  
Aurora IL 60572

Outstanding Balance Beginning This Period

0.00

Transaction ID: D51DCEF2884624EE6A6A

Amount Incurred This Period

123.32

Payment This Period

0.00

Outstanding Balance at Close of This Period

123.32

1) **SUBTOTALS** This Period This Page (optional).....

267.33

2) **TOTALS** This Period (last page this line number only).....

240776.62

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

1302811.25

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

1543587.87